

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="135129.80"/>	<input type="text" value="135129.80"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="182353.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="89114.77"/>	<input type="text" value="460182.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="271468.27"/>	<input type="text" value="595312.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="123500.00"/>	<input type="text" value="447344.03"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="147968.27"/>	<input type="text" value="147968.27"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

UnitedHealth Group Incorporated PAC (United for Health)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	75167.78	351291.85
(ii) Unitemized	13946.99	108890.65
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	89114.77	460182.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	89114.77	460182.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	89114.77	460182.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	89114.77	460182.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	98500.00	380500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	394.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	394.03
29. Other Disbursements	25000.00	66450.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	123500.00	447344.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	123500.00	447344.03

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	89114.77	460182.50
34. Total Contribution Refunds (from Line 28(d))	0.00	394.03
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	89114.77	459788.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. DAVID CALABRESE

Mailing Address 85 LITTLE POND RD

City	State	Zip Code
NORTHBOROUGH	MA	01532-1686

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Optum Services, Inc	VP Med Clin Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : 39478464

Amount of Each Receipt this Period
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. ALLISON DAVENPORT

Mailing Address 141 PELHAM ROAD

City	State	Zip Code
PHILADELPHIA	PA	19119-2661

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : 39478552

Amount of Each Receipt this Period
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DUSTIN HINTON

Mailing Address W132N6475 MARACH RD

City	State	Zip Code
MENOMONEE FALLS	WI	53051-6085

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : 39478729

Amount of Each Receipt this Period
 72.22

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2072.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. GREGORY JAMES

Mailing Address 2323 KINGS POINT DRIVE

City State Zip Code
LARGO FL 33774-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc Sr Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
769.27

Date of Receipt
MM / DD / YYYY
05 / 06 / 2016
Transaction ID : 39478765

Amount of Each Receipt this Period
96.15

Memo Item

Full Name (Last, First, Middle Initial)
B. BRADY PRIEST

Mailing Address 4401 COUNTRY CLUB RD

City State Zip Code
EDINA MN 55424-1148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc VP Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
865.35

Date of Receipt
MM / DD / YYYY
05 / 06 / 2016
Transaction ID : 39479052

Amount of Each Receipt this Period
96.15

Memo Item

Full Name (Last, First, Middle Initial)
C. KARL STINE

Mailing Address PO BOX 265

City State Zip Code
CRESSON PA 16630-0265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Sr Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2016
Transaction ID : 39479178

Amount of Each Receipt this Period
365.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 557.30

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. TIMOTHY A WICKS

Mailing Address PO BOX 44518

City State Zip Code
EDEN PRAIRIE MN 55344-1518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc Pres OptumRx

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
346.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : 39479287

Amount of Each Receipt this Period
38.46

Memo Item

Full Name (Last, First, Middle Initial)
B. DUSTIN HINTON

Mailing Address W132N6475 MARACH RD

City State Zip Code
MENOMONEE FALLS WI 53051-6085

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2016
Transaction ID : 39519169

Amount of Each Receipt this Period
66.44

Memo Item

Full Name (Last, First, Middle Initial)
C. LISA SMITH

Mailing Address 5040 INTERLACHEN BLUFF

City State Zip Code
EDINA MN 55436-1360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc VP Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2016
Transaction ID : 39519587

Amount of Each Receipt this Period
365.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	469.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. TIMOTHY A WICKS

Mailing Address **PO BOX 44518**

City **EDEN PRAIRIE** State **MN** Zip Code **55344-1518**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Optum Services, Inc** Occupation **Pres OptumRx**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1884.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2016

Transaction ID : 39519719

Amount of Each Receipt this Period
1538.46

Memo Item

Full Name (Last, First, Middle Initial)
B. JULIE BUSKE

Mailing Address **12937 HIALEAH COURT**

City **APPLE VALLEY** State **MN** Zip Code **55124-9739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **United HealthCare Services Inc** Occupation **VP Empl Rel**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : 39579199

Amount of Each Receipt this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. JAMES S WATSON III

Mailing Address **6520 SHENANDOAH DR**

City **LINCOLN** State **NE** Zip Code **68510-5159**

FEC ID number of contributing federal political committee. **C**

Name of Employer **United HealthCare Services Inc** Occupation **Assc Gen Counsel**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : PR1159806041528

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **2088.46**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAVID S WICHMANN
Full Name (Last, First, Middle Initial)
Mailing Address 7000 ANTRIM ROAD
City EDINA State MN Zip Code 55439-1708
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation PRES & CFO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1159814741528
Amount of Each Receipt this Period 384.60
 Memo Item
P/R Deduction (\$192.30 Bi-Weekly)

B. PATRICK J ERLANDSON
Full Name (Last, First, Middle Initial)
Mailing Address POBOX 71
City WAYZATA State MN Zip Code 55391-0071
FEC ID number of contributing federal political committee. **C**
Name of Employer UHC International Services Inc Occupation SVP Bus Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1159815941528
Amount of Each Receipt this Period 384.60
 Memo Item
P/R Deduction (\$192.30 Bi-Weekly)

C. WILLIAM A MUNSELL
Full Name (Last, First, Middle Initial)
Mailing Address 2119 WINDSONG CIRCLE
City WAYZATA State MN Zip Code 55391-2259
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Sr Advsr to Office of CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1159816641528
Amount of Each Receipt this Period 200.00
 Memo Item
P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	969.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 147
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN S PENSHORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 BLACK OAKS LANE
 City WAYZATA State MN Zip Code 55391-1363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP UnitedHlth Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1159816941528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. PAUL D KALLMEYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 468 HERALD DR
 City AMBLER State PA Zip Code 19002-1530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Deputy Gen Counsel Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1159817441528
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. THOMAS J QUIRK
 Full Name (Last, First, Middle Initial)
 Mailing Address 4307 BEECHWOOD LANE
 City DALLAS State TX Zip Code 75220-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1159819141528
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	584.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RICHARD J MIGLIORI
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 72

City WAYZATA State MN Zip Code 55391-0072

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation EVP Consumr Hlth Med Care

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1730.38

Date of Receipt
05 / 31 / 2016
Transaction ID : PR1159827441528

Amount of Each Receipt this Period
408.68

Memo Item

P/R Deduction (\$204.34 Bi-Weekly)

B. JEANNINE M RIVET
Full Name (Last, First, Middle Initial)

Mailing Address 4305 TRILLIUM WAY

City MINNETRISTA State MN Zip Code 55364-7708

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation EVP UnitedHlth Grp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1923.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR1159830041528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. MICHAEL C MATTEO
Full Name (Last, First, Middle Initial)

Mailing Address 25 JEREMIAHS WAY

City SOUTH GLASTONBURY State CT Zip Code 06073-3621

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Chief Growth Off

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1153.80

Date of Receipt
05 / 31 / 2016
Transaction ID : PR1551133441528

Amount of Each Receipt this Period
230.76

Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1024.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN O ENDERLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 ANDREIS TRAIL
 City SOUTH WINDSOR State CT Zip Code 06074-2142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Regn Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1554323541528
 Amount of Each Receipt this Period 110.00
 Memo Item
 P/R Deduction (\$55.00 Bi-Weekly)

B. KATHERINE V MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2321 HARBOR LAKE DRIVE
 City ORANGE PARK State FL Zip Code 32003-7799
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Ntwk Contrctng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1554324341528
 Amount of Each Receipt this Period 93.40
 Memo Item
 P/R Deduction (\$46.70 Bi-Weekly)

C. CRAIG C ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 47 AMATO CIRCLE
 City WETHERSFIELD State CT Zip Code 06109-3971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn Pres Ntwk Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1575957341528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	280.32
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KAREN L ERICKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 15348 RED OAKS ROAD SE
 City PRIOR LAKE State MN Zip Code 55372-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Optum Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1575957641528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. ERNEST MONFILETTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 3062 COMFORT ROAD
 City NEW HOPE State PA Zip Code 18938-5622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Ntwk Prgms
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.20

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1575958141528
 Amount of Each Receipt this Period 153.84
 Memo Item
 P/R Deduction (\$76.92 Bi-Weekly)

C. LEE D VALENTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4701 GOLF TERRACE
 City EDINA State MN Zip Code 55424-1514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Pres Lif Scis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1575958541528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	923.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 147
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN W KELLY
Full Name (Last, First, Middle Initial)
Mailing Address 568 HAWTHORNE WOODS DRIVE

City EAGAN	State MN	Zip Code 55123-3059
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation VP Tax
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
652.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR1575959741528

Amount of Each Receipt this Period
217.38

Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

B. ROBERT THOMAS WEBB
Full Name (Last, First, Middle Initial)
Mailing Address 4516 DREXEL AVENUE

City EDINA	State MN	Zip Code 55424-1130
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation SVP UnitedHlth Grp
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1923.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR1580865341528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. RICHARD J HUGHES
Full Name (Last, First, Middle Initial)
Mailing Address 735 SAINT MORITZ

City VICTORIA	State MN	Zip Code 55386-3706
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation SVP COO of Human Capital
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR1596304141528

Amount of Each Receipt this Period
200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	801.98
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THAD C JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9741 GLACIER BAY
 City EDEN PRAIRIE State MN Zip Code 55347-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Mkt Group Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.38

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596304341528
 Amount of Each Receipt this Period 408.68
 Memo Item
 P/R Deduction (\$204.34 Bi-Weekly)

B. DANIEL J SCHUMACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5401 LARADA LANE
 City EDINA State MN Zip Code 55436-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Mkt Group COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596305441528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. THOMAS D LEWIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 306 CHIPPEWA AVENUE
 City TAMPA State FL Zip Code 33606-3614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.37

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596306941528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	985.58
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ROBERT W OBERRENDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4505 MOORLAND AVENUE
 City EDINA State MN Zip Code 55424-1158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1586.35

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596307041528
 Amount of Each Receipt this Period 414.54
 Memo Item
 P/R Deduction (\$207.27 Bi-Weekly)

B. DIANE BEDNAR FLYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3318 FOXRIDGE CIRCLE
 City TAMPA State FL Zip Code 33618-2149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Regn Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596309741528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

C. TRACY L DAVIDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6058 HARBOUR TOWN CIR
 City WESTERVILLE State OH Zip Code 43082-8144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1174.80

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596311641528
 Amount of Each Receipt this Period 454.54
 Memo Item
 P/R Deduction (\$227.27 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	947.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KATHLEEN A MALLATT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4304 SOUTH 167 AVENUE
 City OMAHA State NE Zip Code 68135-1353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596315441528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. DANIEL I ROSENTHAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 SLEEPY HOLLOW LANE
 City ORINDA State CA Zip Code 94563-1340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Pres Ntwk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596317341528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. KEVIN J RUTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 16621 ALEXANDER MANOR DRIVE
 City SILVER SPRING State MD Zip Code 20905-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP, Hlth Advancement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596317441528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	653.82
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAVID C STURKEY
Full Name (Last, First, Middle Initial)

Mailing Address 1625 CONE FLOWER WAY

City SUWANEE State GA Zip Code 30024-8576

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation KA VP Acct Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596318441528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

B. JEFFREY ALAN TODD
Full Name (Last, First, Middle Initial)

Mailing Address 467 PRAIRIE WAY SOUTH

City BAYPORT State MN Zip Code 55003-1607

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Underwriting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596319041528

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

C. CHRIS B TURNAU
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 43216
3741 DUNBAR KNOLL

City BROOKLYN PARK State MN Zip Code 55443-0216

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1596319141528

Amount of Each Receipt this Period 90.00

Memo Item

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	218.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN P DODDY
Full Name (Last, First, Middle Initial)

Mailing Address 1 ROXITICUS VIEW

City CHESTER State NJ Zip Code 07930-3020

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VP Info Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1600597341528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

B. MICHAEL D MICHAUX
Full Name (Last, First, Middle Initial)

Mailing Address 742 GOODRICH AVE

City SAINT PAUL State MN Zip Code 55105-3343

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VP GM PCM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1600598541528

Amount of Each Receipt this Period 200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

C. LEWIS G SANDY
Full Name (Last, First, Middle Initial)

Mailing Address 4800 SUNNYSLOPE ROAD E

City EDINA State MN Zip Code 55424-1163

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Clin Advancement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1600598741528

Amount of Each Receipt this Period 200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 478.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MATTHEW W PETERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2260 FOX STREET
 City ORONO State MN Zip Code 55356-8316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation CEO Ancillary & Ind/Sgt CAO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1602669941528
 Amount of Each Receipt this Period 400.00
 Memo Item
 P/R Deduction (\$200.00 Bi-Weekly)

B. JEFFREY W MALONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6327 PASADENA POINT BLVD S
 City GULFPORT State FL Zip Code 33707-3867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1613243541528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

C. THOMAS J BELLAMY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2743 THOMAS AVENUE SOUTH
 City MINNEAPOLIS State MN Zip Code 55416-4346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Sls Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 577.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1653444341528
 Amount of Each Receipt this Period 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	707.70
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DANIEL T SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 57 QUORN HUNT ROAD

City WEST SIMSBURY State CT Zip Code 06092-2524

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR1653445841528

Amount of Each Receipt this Period **76.92**

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. WILLIAM TALAMANTES
Full Name (Last, First, Middle Initial)

Mailing Address 6025 ORRIS STREET

City MCLEAN State VA Zip Code 22101-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Six Sigma Cnslt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR1806444741528

Amount of Each Receipt this Period **80.00**

Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

C. PAUL M EMERSON
Full Name (Last, First, Middle Initial)

Mailing Address 18855 MEADOW VIEW BLVD

City PRIOR LAKE State MN Zip Code 55372-3133

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum360 Services Inc Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR1806750341528

Amount of Each Receipt this Period **76.92**

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	233.84
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CATHERINE K ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 SIMMONS LANE
 City SEVERNA PARK State MD Zip Code 21146-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Bus Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 970.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1903550741528
 Amount of Each Receipt this Period 194.00
 Memo Item
 P/R Deduction (\$97.00 Bi-Weekly)

B. ROBERT J DUFEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 816 PROMONTORY PLACE
 City EAGAN State MN Zip Code 55123-2297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1903577141528
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. CHRISTOPHER T JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 12880 53RD STREET NORTH
 City STILLWATER State MN Zip Code 55082-1063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1903591141528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	322.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN C SANTELLI
Full Name (Last, First, Middle Initial)

Mailing Address 25510 BIRCH BLUFF ROAD

City EXCELSIOR State MN Zip Code 55331-8520

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation SVP CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1730.38

Date of Receipt
05 / 31 / 2016
Transaction ID : PR1903622041528

Amount of Each Receipt this Period
408.68

Memo Item

P/R Deduction (\$204.34 Bi-Weekly)

B. KATHIE L BRYAN
Full Name (Last, First, Middle Initial)

Mailing Address 912 JOSHUA PLACE

City SAN DIEGO State CA Zip Code 92154-2537

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Mktg Cnslt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2119469441528

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

C. RICHARD A CROSS
Full Name (Last, First, Middle Initial)

Mailing Address 11361 DONOVAN ROAD

City ROSSMOOR State CA Zip Code 90720-2931

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2119471841528

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	508.68
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAVID M HANSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 VIA CONOCIDO
 City SAN CLEMENTE State CA Zip Code 92673-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn Pres Ntwk Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2119476741528
 Amount of Each Receipt this Period 270.00
 Memo Item
 P/R Deduction (\$135.00 Bi-Weekly)

B. SAMUEL W HO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4220 OCEAN DR
 City MANHATTAN BEACH State CA Zip Code 90266-3059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Mkt Grp Chief Clin Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1842.71

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2119477941528
 Amount of Each Receipt this Period 394.66
 Memo Item
 P/R Deduction (\$197.33 Bi-Weekly)

C. BRIAN JEFFREY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 RIMROCK
 City IRVINE State CA Zip Code 92603-3604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn Pres Ntwk Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2119479141528
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 714.66
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LYNDA A PAXSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3924 E GARNET PL
 City State Zip Code
 HIGHLANDS RANCH CO 80126-5044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UNITED HEALTHCARE SVS INC Sr Field Acct Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR2119485841528
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. AUSTIN T PITTMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 LOCH RIDGE DRIVE
 City State Zip Code
 GREENSBORO NC 27408-3868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1886.40

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR2119486741528
 Amount of Each Receipt this Period
 389.20
 Memo Item
 P/R Deduction (\$194.60 Bi-Weekly)

C. CYNTHIA L POLICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 3401 E VIA PALOMITA
 City State Zip Code
 TUCSON AZ 85718-3371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc SVP Strat Initiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR2119486841528
 Amount of Each Receipt this Period
 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	639.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 147
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CHERYL TANIGAWA MD
Full Name (Last, First, Middle Initial)

Mailing Address 5598 NAPLES CANAL

City State Zip Code
LONG BEACH CA 90803-4018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc SVP Entrprs Hlth Svs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt
05 / 31 / 2016

Transaction ID : PR2119491141528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. STEVEN M TUCKER
Full Name (Last, First, Middle Initial)

Mailing Address 12331 COUNTRY LANE

City State Zip Code
SANTA ANA CA 92705-3330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc VP Regl Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **960.00**

Date of Receipt
05 / 31 / 2016

Transaction ID : PR2119492041528

Amount of Each Receipt this Period
192.00

Memo Item

P/R Deduction (\$96.00 Bi-Weekly)

C. SUSAN VANASTEN
Full Name (Last, First, Middle Initial)

Mailing Address N2249 NICOLE COURT

City State Zip Code
KAUKAUNA WI 54130-9462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Site Dir Medicr Ins SlS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
05 / 31 / 2016

Transaction ID : PR2119492641528

Amount of Each Receipt this Period
80.00

Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	464.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. GREGORY WRIGHT
Full Name (Last, First, Middle Initial)
Mailing Address 10471 STRAND TERRACE

City SANTA ANA	State CA	Zip Code 92705-1495
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Regn CEO
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2119494141528

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

B. JOHN TYLER J MASON
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2083

City CYPRESS	State CA	Zip Code 90630-1583
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation VP Comm
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1730.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2126373841528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. FORREST G BURKE
Full Name (Last, First, Middle Initial)
Mailing Address 380 LEAF STREET

City ORONO	State MN	Zip Code 55356-9733
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Pres PS Labor Trust
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1654.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2133132441528

Amount of Each Receipt this Period
418.18

Memo Item

P/R Deduction (\$209.09 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	852.78
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BROR O HULTGREN
 Full Name (Last, First, Middle Initial)
 Mailing Address 408 22ND ST
 City GOLDEN State CO Zip Code 80401-2452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.41

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2133133241528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

B. SUSAN C MORISATO
 Full Name (Last, First, Middle Initial)
 Mailing Address 238 ARDMORE ROAD
 City DES PLAINES State IL Zip Code 60016-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Pres Insurance Sols
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1924.40

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2133133841528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. T JEFFREY PUTNAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 ELMWOOD PLACE WEST
 City MINNEAPOLIS State MN Zip Code 55419-1349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Fin Plng Anlys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2133134241528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	961.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DIANE M SCHIMMELBUSCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2203 RIVER FALLS DRIVE
 City KINGWOOD State TX Zip Code 77339-3124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2133134641528
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. ROBERT C FALKENBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 LANTANA
 City NEWPORT COAST State CA Zip Code 92657-1646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2145728441528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. DANNETTE L SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4200 ALDEN DRIVE
 City EDINA State MN Zip Code 55416-5010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Sr Deputy Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1924.40

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2145729941528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	511.52
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAVID A SPIVACK
Full Name (Last, First, Middle Initial)
Mailing Address 37 HIDDEN TRAIL

City IRVINE	State CA	Zip Code 92603-0212
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc	Occupation SVP Bus Ops
---	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1730.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2162867641528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

B. CHRISTINE W GIBSON
Full Name (Last, First, Middle Initial)
Mailing Address 8516 29TH AVE N

City NEW HOPE	State MN	Zip Code 55427-2622
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc	Occupation VP Strat Initiv
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2225166741528

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. JEAN-FRANCOIS BEAULE
Full Name (Last, First, Middle Initial)
Mailing Address 7 STRATFORD RD

City FARMINGTON	State CT	Zip Code 06032-1444
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation SVP Hlth Advancement
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
577.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2225813641528

Amount of Each Receipt this Period
115.40

Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	576.92
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ERIC S RANGEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 15348 RED OAKS ROAD SE
 City PRIOR LAKE State MN Zip Code 55372-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Optum Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2225819341528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. JOHN D RYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 WESTMORELAND LN
 City NAPERVILLE State IL Zip Code 60540-5817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation RVP Clnt Mgmt Svc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.23

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2225819641528
 Amount of Each Receipt this Period 115.38
 Memo Item
 P/R Deduction (\$57.69 Bi-Weekly)

C. ROY THOMAS SAILOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 276 COYOTE WILLOW DRIVE
 City COLORADO SPRINGS State CO Zip Code 80921-7631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Bus Dvlp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.20

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2225819741528
 Amount of Each Receipt this Period 153.84
 Memo Item
 P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	653.82
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MICHAEL R CONNLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 570 MONTCALM PL
 City SAINT PAUL State MN Zip Code 55116-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Chief Tech Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2247625841528
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

B. JOSEPH R CARCIONE JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 CARRIAGE WAY
 City WHITE PLAINS State NY Zip Code 10605-5424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 577.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2247626841528
 Amount of Each Receipt this Period 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

C. KEVIN DAVID KANTOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 7031 HALSTEAD DRIVE
 City MINNETRISTA State MN Zip Code 55364-3201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2247627041528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	393.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DENNIS P O'BRIEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 LOUGHLIN AVE
 City COS COB State CT Zip Code 06807-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1643.34

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2247627341528
 Amount of Each Receipt this Period 419.58
 Memo Item
 P/R Deduction (\$209.79 Bi-Weekly)

B. JEFFERY RICHARD VERNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 266 WESTLEDGE ROAD
 City WEST SIMSBURY State CT Zip Code 06092-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2247627441528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

C. SANJAY GARODIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 COVINGTON COURT
 City OAK BROOK State IL Zip Code 60523-2574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2247627841528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	688.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DANIEL L OHMAN
Full Name (Last, First, Middle Initial)

Mailing Address 8970 MOOR PARK RUN

City State Zip Code
DULUTH GA 30097-6621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
961.50

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2247628041528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. JOHN M PRINCE
Full Name (Last, First, Middle Initial)

Mailing Address 546 HARRINGTON ROAD

City State Zip Code
WAYZATA MN 55391-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc Mkt Group COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1724.11

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2259738441528

Amount of Each Receipt this Period
409.46

Memo Item

P/R Deduction (\$204.73 Bi-Weekly)

C. CHRISTOPHER L CRONN
Full Name (Last, First, Middle Initial)

Mailing Address 1122 COLORADO STREET
SUITE 2399

City State Zip Code
AUSTIN TX 78701-2132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Govt Affs Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2270522941528

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	678.68
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JAKE LOGAN
Full Name (Last, First, Middle Initial)

Mailing Address 4826 EAST CALLE REDONDA

City PHOENIX	State AZ	Zip Code 85018-2931
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Govt Affs Dir
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
865.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2402318241528

Amount of Each Receipt this Period
 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. SHELLEY WIKE CRANLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3801 MAURICE COURT

City LAS VEGAS	State NV	Zip Code 89108-5245
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Dir Regl Affs
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2402444441528

Amount of Each Receipt this Period
 50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

C. JAMES H BECKER
Full Name (Last, First, Middle Initial)

Mailing Address 378 FERNDAL ROAD WEST

City WAYZATA	State MN	Zip Code 55391-1559
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation SVP Ops
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1730.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2402445141528

Amount of Each Receipt this Period
 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	626.90
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JAMES C COLEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 4720 WEST 66TH STREET

City	State	Zip Code
EDINA	MN	55435-1506

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	Mkt Grp SVP, Human Capital

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2402445241528

Amount of Each Receipt this Period
200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

B. JOHN L LARSEN
Full Name (Last, First, Middle Initial)

Mailing Address 11688 TANGLEWOOD DRIVE

City	State	Zip Code
EDEN PRAIRIE	MN	55347-4726

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Optum Services, Inc	Bus Segment CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1924.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2402445641528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. JOY O HIGA
Full Name (Last, First, Middle Initial)

Mailing Address 2208 ELM AVENUE

City	State	Zip Code
MANHATTAN BEACH	CA	90266-2809

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	VP Regl Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2402446241528

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	644.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CORY ALEXANDER
Full Name (Last, First, Middle Initial)

Mailing Address 4203 BRADLEY LANE

City CHEVY CHASE State MD Zip Code 20815-5234

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation EVP External Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2405428841528

Amount of Each Receipt this Period 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

B. KATHLYN G WEE
Full Name (Last, First, Middle Initial)

Mailing Address 2225 46TH ST NW

City WASHINGTON State DC Zip Code 20007-1032

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation SVP State SIs Optuml

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1812.80

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2408545041528

Amount of Each Receipt this Period 398.40

Memo Item

P/R Deduction (\$199.20 Bi-Weekly)

C. WILLIAM A HAGAN
Full Name (Last, First, Middle Initial)

Mailing Address 6536 E GREYTHORN DRIVE

City SCOTTSDALE State AZ Zip Code 85266-6761

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP, Hlth Advancement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2437120041528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	859.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JACK S WEISS
Full Name (Last, First, Middle Initial)

Mailing Address 6245 NORTH 75 STREET

City SCOTTSDALE State AZ Zip Code 85250-4621

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Bus Seg Chief Med Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2437120541528

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

B. PAUL JOSEPH BALTHAZOR
Full Name (Last, First, Middle Initial)

Mailing Address 9013 FARNSWORTH AVENUE NORTH

City BROOKLYN PARK State MN Zip Code 55443-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Bus Segment COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1288.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2437120741528

Amount of Each Receipt this Period 464.00

Memo Item

P/R Deduction (\$232.00 Bi-Weekly)

C. LAURA L NESS
Full Name (Last, First, Middle Initial)

Mailing Address 10550 PINNACLE WAY

City WOODBURY State MN Zip Code 55129-4282

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2437121541528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	592.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN W COSGRIFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 1837 SUMMIT LANE
 City MENDOTA HEIGHTS State MN Zip Code 55118-4137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Strategy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1730.90**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2437121641528
 Amount of Each Receipt this Period **384.60**
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. BRETT E EDELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 DREXEL AVENUE
 City EDINA State MN Zip Code 55424-1132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Prd
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **272.70**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2437127141528
 Amount of Each Receipt this Period **90.90**
 Memo Item
 P/R Deduction (\$45.45 Bi-Weekly)

C. PETER W RAINEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3115 WEST 47 STREET
 City MINNEAPOLIS State MN Zip Code 55410-1857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Fin
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1628.55**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2437127541528
 Amount of Each Receipt this Period **421.42**
 Memo Item
 P/R Deduction (\$210.71 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	896.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ROBIN E LIPPERT
Full Name (Last, First, Middle Initial)

Mailing Address UNIT 9600 BOX 2

City State Zip Code
DPO AP 96209-0002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc VP External Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1923.02

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2439928041528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

B. STEPHEN M HEYMAN
Full Name (Last, First, Middle Initial)

Mailing Address 5300 SHERRILL AVENUE

City State Zip Code
CHEVY CHASE MD 20815-3720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc SVP Govt Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1923.02

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2444265741528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. AMY R ADLINGTON SHKABERIN
Full Name (Last, First, Middle Initial)

Mailing Address 4329 EWING AVE S

City State Zip Code
MINNEAPOLIS MN 55410-1342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc VP Human Capital

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1199.60

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2445016441528

Amount of Each Receipt this Period
287.54

Memo Item

P/R Deduction (\$143.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1056.74
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAVID B SIEGEL
Full Name (Last, First, Middle Initial)

Mailing Address 264 LAKEWOOD DRIVE

City BLOOMFIELD HILLS State MI Zip Code 48304-3531

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 456.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2445017141528

Amount of Each Receipt this Period 91.26

Memo Item

P/R Deduction (\$45.63 Bi-Weekly)

B. EILEEN J LIVERANI
Full Name (Last, First, Middle Initial)

Mailing Address 100 BOSTOCK ROAD

City SHOKAN State NY Zip Code 12481-5400

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Cust Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2460167241528

Amount of Each Receipt this Period 55.40

Memo Item

P/R Deduction (\$27.70 Bi-Weekly)

C. LARRY C RENFRO
Full Name (Last, First, Middle Initial)

Mailing Address 5 DOVE LANE

City ANDOVER State MA Zip Code 01810-2845

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VICE CHAIRMAN & CEO Optum

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2460168141528

Amount of Each Receipt this Period 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	531.26
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DAVID B ORBUCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2220 CEDAR LAKE PKWY
 City State Zip Code
 MINNEAPOLIS MN 55416-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc Optum Exec
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 961.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2460168241528
 Amount of Each Receipt this Period
 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

B. ERIC J WEXLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7220 WILLOW OAK DR
 City State Zip Code
 WEST BLOOMFIELD MI 48324-3081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Bus Segment Gen Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2463723141528
 Amount of Each Receipt this Period
 64.00
 Memo Item
 P/R Deduction (\$32.00 Bi-Weekly)

C. SUE SCHICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1220 DENBIGH LANE
 City State Zip Code
 WAYNE PA 19087-4644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Chief Growth Off
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1730.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2480620541528
 Amount of Each Receipt this Period
 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	640.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MATTHEW A BURNS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2724 BISON DRIVE
 City EDMOND State OK Zip Code 73034-3475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.92

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2484541741528
 Amount of Each Receipt this Period 250.00
 Memo Item
 P/R Deduction (\$125.00 Bi-Weekly)

B. MARK A PHILLIPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1760 LUCY RIDGE CT
 City CHANHASSEN State MN Zip Code 55317-7661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP SIs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1643.34

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2484542641528
 Amount of Each Receipt this Period 419.58
 Memo Item
 P/R Deduction (\$209.79 Bi-Weekly)

C. THOMAS B MANDERFELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3760 WEST CALHOUN PARKWAY
 City MINNEAPOLIS State MN Zip Code 55410-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Capital Mkt Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2486697941528
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	749.58
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. DIRK C MCMAHON
Full Name (Last, First, Middle Initial)

Mailing Address 60 WILDHURST ROAD

City EXCELSIOR State MN Zip Code 55331-8461

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation EVP ENTRPRS OPS/TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1654.54**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2491457041528

Amount of Each Receipt this Period **418.18**

Memo Item

P/R Deduction (\$209.09 Bi-Weekly)

B. DONALD H NATHAN
Full Name (Last, First, Middle Initial)

Mailing Address 275 GREENWICH STREET #30

City NEW YORK State NY Zip Code 10007-2150

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Chief Comm Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1730.77**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2491457341528

Amount of Each Receipt this Period **384.60**

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. KATHRYN M SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 530 N LAKE SHORE DR # 2309

City CHICAGO State IL Zip Code 60611-7435

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation CEO E&I Regions

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **970.00**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2491457541528

Amount of Each Receipt this Period **194.00**

Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	996.78
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KARA V SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 610 CRESTWOOD DRIVE

City ALEXANDRIA State VA Zip Code 22302-2533

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2540175341528

Amount of Each Receipt this Period 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

B. HYLLIUS R EDWARDS
Full Name (Last, First, Middle Initial)

Mailing Address 1541 S VINE STREET

City DENVER State CO Zip Code 80210-2835

FEC ID number of contributing federal political committee. **C**

Name of Employer UHC International Services Inc Occupation External Affs Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2541300441528

Amount of Each Receipt this Period 100.00

Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

C. PATRICIA A PURDY
Full Name (Last, First, Middle Initial)

Mailing Address 7417 LYNNHURST STREET

City CHEVY CHASE State MD Zip Code 20815-3101

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 981.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2541300641528

Amount of Each Receipt this Period 196.30

Memo Item

P/R Deduction (\$98.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	680.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOELLE M TIERNEY
Full Name (Last, First, Middle Initial)

Mailing Address 5710 TAYCHOPERA RD

City MADISON State WI Zip Code 53705-1020

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1346.18**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2541300741528

Amount of Each Receipt this Period **76.92**

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. JOHN VERSAGGI
Full Name (Last, First, Middle Initial)

Mailing Address 800 ALBANY AVENUE

City ALEXANDRIA State VA Zip Code 22302-3501

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.60**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2541300841528

Amount of Each Receipt this Period **192.32**

Memo Item

P/R Deduction (\$96.16 Bi-Weekly)

C. BRENDAN HOSTETLER
Full Name (Last, First, Middle Initial)

Mailing Address 2309 W WINNEMAC AVE

City CHICAGO State IL Zip Code 60625-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **366.92**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2542541941528

Amount of Each Receipt this Period **79.12**

Memo Item

P/R Deduction (\$39.56 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	348.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RICHARD E RAMSAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 543 E LURAY AVE
 City ALEXANDRIA State VA Zip Code 22301-1605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Regl Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2542542241528
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

B. IPYANA SPENCER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4226 40TH STREET NORTH
 City ARLINGTON State VA Zip Code 22207-4610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2542542341528
 Amount of Each Receipt this Period 60.00
 Memo Item
 P/R Deduction (\$30.00 Bi-Weekly)

C. ANNE YAU
 Full Name (Last, First, Middle Initial)
 Mailing Address 9905 WOODLAND DRIVE
 City SILVER SPRING State MD Zip Code 20902-4047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation External Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2543582541528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	236.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CHANTA G COMBS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4229 SUMMERTREE DRIVE
 City TALLAHASSEE State FL Zip Code 32311-3331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Govt Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552313541528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. JEANNE M PACE
 Full Name (Last, First, Middle Initial)
 Mailing Address 458 MORENO ROAD
 City WYNNEWOOD State PA Zip Code 19096-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation KA Sr Acct Exe
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552313741528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

C. JEFFREY D ALTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 WOODLAND ROAD
 City PORT JEFFERSON State NY Zip Code 11777-1053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.84

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552960241528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	539.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 147
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JEREMY VAUGHN BRYANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4534 MYSTIQUE WAY
 City ROSWELL State GA Zip Code 30075-2087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Clnt Mgmt NA Accts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552961341528
 Amount of Each Receipt this Period 70.00
 Memo Item
 P/R Deduction (\$35.00 Bi-Weekly)

B. SCOTT F FLANNERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8508 TRELADY CT
 City PLANO State TX Zip Code 75024-6827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn Growth Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552962341528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

C. CLAIRE L HANNAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 25932 PORTAFINO DRIVE
 City MISSION VIEJO State CA Zip Code 92691-5716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552962741528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	226.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN H LOVELADY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6268 ORCHARD PARK
 City FRISCO State TX Zip Code 75034-5126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552964241528
 Amount of Each Receipt this Period 416.66
 Memo Item
 P/R Deduction (\$208.33 Bi-Weekly)

B. BARRY R STREIT
 Full Name (Last, First, Middle Initial)
 Mailing Address 5421 KELLOGG AVENUE
 City EDINA State MN Zip Code 55424-1604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation RVP Medicr Field Sls
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.16

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2552966741528
 Amount of Each Receipt this Period 125.72
 Memo Item
 P/R Deduction (\$62.86 Bi-Weekly)

C. MONICA L RAYBURN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5127 JACKSON PONDS CT
 City SUGAR LAND State TX Zip Code 77479-4656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2553475141528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	620.38
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RICHARD D THOMAS
Full Name (Last, First, Middle Initial)

Mailing Address 5121 DUPONT AVENUE SOUTH

City	State	Zip Code
MINNEAPOLIS	MN	55419-1151

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	VP Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
970.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2553475441528

Amount of Each Receipt this Period
194.00

Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

B. DENEEN VOJTA
Full Name (Last, First, Middle Initial)

Mailing Address 5201 KELLOGG AVENUE

City	State	Zip Code
EDINA	MN	55424-1304

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	SVP Bus Initiv Clin Aff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1924.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2553475541528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. KARSTEN S FLAGSTAD
Full Name (Last, First, Middle Initial)

Mailing Address 13420 JAY ST NW

City	State	Zip Code
ANDOVER	MN	55304-4015

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Optum Services, Inc	VP Info Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1571.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2554013041528

Amount of Each Receipt this Period
428.56

Memo Item

P/R Deduction (\$214.28 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1007.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ALICE C FERREIRA
Full Name (Last, First, Middle Initial)

Mailing Address 18 BRITTANY AVENUE

City TRUMBULL State CT Zip Code 06611-1105

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.23

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2554208141528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. DANIEL J CLUTE
Full Name (Last, First, Middle Initial)

Mailing Address 7756 N 85TH STREET

City OMAHA State NE Zip Code 68122-1281

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2560064441528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. DONALD J GIANCURSIO
Full Name (Last, First, Middle Initial)

Mailing Address 72 MIDNIGHT RIDGE DR

City LAS VEGAS State NV Zip Code 89135-1680

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Plan of Nevada Occupation Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1924.40

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2560064941528

Amount of Each Receipt this Period 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	538.44
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JERI L JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 512 W ORANGEWOOD AVE
 City PHOENIX State AZ Zip Code 85021-7252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2560065141528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

B. GREGG J KUNEMUND
 Full Name (Last, First, Middle Initial)
 Mailing Address 4451 RIVER BOTTOM DRIVE
 City NORCROSS State GA Zip Code 30092-1362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.05

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2560065341528
 Amount of Each Receipt this Period 157.62
 Memo Item
 P/R Deduction (\$78.81 Bi-Weekly)

C. SHELDON LIPPMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 CLIFFIELD ROAD
 City BEDFORD State NY Zip Code 10506-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 970.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2560065441528
 Amount of Each Receipt this Period 194.00
 Memo Item
 P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	543.92
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. JEFFREY D LUCHT

Mailing Address 33 FOUR SEASONS DRIVE

City ALTON State NH Zip Code 03809-4872

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Act Underwriting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **970.00**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2560065641528

Amount of Each Receipt this Period **194.00**

Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DAVID MILICH

Mailing Address 2702 BIRCHMERE COURT

City KATY State TX Zip Code 77450-1303

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2560066041528

Amount of Each Receipt this Period **78.00**

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. TIMOTHY J NOEL

Mailing Address 4316 FREMONT AVENUE SOUTH

City MINNEAPOLIS State MN Zip Code 55409-1721

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Prd

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1923.00**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2560398841528

Amount of Each Receipt this Period **384.60**

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	656.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 147
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. JAMES CRONIN

Mailing Address 241 WALLACE RD

City State Zip Code
 BEDFORD NH 03110-5144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 United HealthCare Services Inc SVP Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **865.41**

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR2560821141528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. BRIAN W LUND

Mailing Address 464 EAST NORTH AVE

City State Zip Code
 GRANTSBURG WI 54840-7423

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 United HealthCare Services Inc Dir Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR2561457641528

Amount of Each Receipt this Period
78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. LARRY W CAVANAUGH

Mailing Address 520 NE 20TH ST # 1010

City State Zip Code
 WILTON MANORS FL 33305-2162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 DENTAL BENEFIT PROV INC Spc Ben Govt Dntl Sls Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR2563211041528

Amount of Each Receipt this Period
78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **348.30**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JACQULYN M BARTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1587 112 TH COURT WEST
 City State Zip Code
 INVER GROVE HEIGHTS MN 55077-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Human Capital Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2563211241528
 Amount of Each Receipt this Period
 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

B. ARTHUR R MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 509 W BAY STREET
 UNIT 306
 City State Zip Code
 TAMPA FL 33606-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 272.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2564296941528
 Amount of Each Receipt this Period
 90.90
 Memo Item
 P/R Deduction (\$45.45 Bi-Weekly)

C. ANDREW C MACKENZIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1912 IRVING AVE S
 City State Zip Code
 MINNEAPOLIS MN 55403-2823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Bus Segment CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2564297141528
 Amount of Each Receipt this Period
 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	490.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. STEPHEN E SWANSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3001 HUNTINGTON COURT
 City KATY State TX Zip Code 77493-1159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation KA VP Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2564297341528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

B. STEVEN C WALLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 538 QUAIL RIDGE LANE
 City SAINT ALBANS State MO Zip Code 63073-1014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.18

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2564297641528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. PAUL DANIEL HANSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 18430 62ND PLACE NORTH
 City MAPLE GROVE State MN Zip Code 55311-4585
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Controller Mkt Grp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 970.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2564802741528
 Amount of Each Receipt this Period 194.00
 Memo Item
 P/R Deduction (\$97.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	348.92
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KATHERINE L KENNY
 Full Name (Last, First, Middle Initial)
 Mailing Address 22408 FITZGERALD DRIVE
 City LAYTONSVILLE State MD Zip Code 20882-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SB VP of Acct Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2564803241528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

B. PAUL O MARDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 718 HICKORY HILL RD
 City FRANKLIN LAKES State NJ Zip Code 07417-1707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2564803341528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

C. DARREN C MOQUIST
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 NICOLLET MALL #507
 City MINNEAPOLIS State MN Zip Code 55403-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Bus Segment CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2564803441528
 Amount of Each Receipt this Period 192.32
 Memo Item
 P/R Deduction (\$96.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	348.32
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. TAMMY A O'HARE

Mailing Address 2420 SAINT GEORGE WAY

City State Zip Code
BROOKEVILLE MD 20833-3265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc SB VP Sls

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : PR2564803941528

Amount of Each Receipt this Period
78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. DEBRA J BERNS

Mailing Address 3209 GALLERIA UNIT 1705

City State Zip Code
EDINA MN 55435-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Chief Complnc/Ethics Off

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1724.11

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : PR2564804041528

Amount of Each Receipt this Period
409.46

Memo Item

P/R Deduction (\$204.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. WENDY D ARNONE

Mailing Address 5243 E DESERT PARK LANE

City State Zip Code
PARADISE VALLEY AZ 85253-3015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1923.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : PR2568900541528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	872.06
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CHRISTOPHER A PARRILLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 9501 WEXCROFT DRIVE
 City BRENTWOOD State TN Zip Code 37027-3824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Ntwk Contrctng
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **346.14**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2571778241528
 Amount of Each Receipt this Period **76.92**
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. BRUCE E MOYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 18426 MAGENTA BAY
 City EDEN PRAIRIE State MN Zip Code 55347-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2571778341528
 Amount of Each Receipt this Period **78.00**
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

C. KEVIN JAMES CARLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4511 BROWDALE AVENUE
 City EDINA State MN Zip Code 55424-1142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Ntwk Contrctng
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **795.24**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2572590041528
 Amount of Each Receipt this Period **213.08**
 Memo Item
 P/R Deduction (\$106.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	368.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THOMAS P WIFFLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 SOMERFIELD DRIVE
 City BOLINGBROOK State IL Zip Code 60490-3207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Bus Segment COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2572992741528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. TRENT L SIMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3111 NORCREST AVE N
 City STILLWATER State MN Zip Code 55082-1779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.29

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2574985041528
 Amount of Each Receipt this Period 86.94
 Memo Item
 P/R Deduction (\$43.47 Bi-Weekly)

C. HEATHER R CIANFROCCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2799 WEST BARDONNER ROAD
 City GIBSONIA State PA Zip Code 15044-8462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Regn CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2574986241528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	856.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JAMIE BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address 4625 EWING AVENUE SOUTH

City State Zip Code
MINNEAPOLIS MN 55410-1745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc VP IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt
05 / 31 / 2016

Transaction ID : PR2574988241528

Amount of Each Receipt this Period
78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

B. DAVID W ALLAZETTA
Full Name (Last, First, Middle Initial)

Mailing Address 339 DARTMOUTH HILLS STREET

City State Zip Code
LAS VEGAS NV 89138-1544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Hlth Plan CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt
05 / 31 / 2016

Transaction ID : PR2574995441528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

C. MICHELE M DUNCAN
Full Name (Last, First, Middle Initial)

Mailing Address 3038 FAIRWAY CIRCLE

City State Zip Code
CHASKA MN 55318-3408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc VP Compli

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1410.64**

Date of Receipt
05 / 31 / 2016

Transaction ID : PR2575029641528

Amount of Each Receipt this Period
403.04

Memo Item

P/R Deduction (\$201.52 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	673.34
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LORI A VAN HOLMES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4117 BRYANT AVENUE SOUTH
 City State Zip Code
 MINNEAPOLIS MN 55409-1423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc VP Human Capital Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 970.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2575030941528
 Amount of Each Receipt this Period
 194.00
 Memo Item
 P/R Deduction (\$97.00 Bi-Weekly)

B. JENNIFER M O'BRIEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4371 BENT TREE LANE
 City State Zip Code
 EAGAN MN 55123-3054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Chief Compli Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2575034541528
 Amount of Each Receipt this Period
 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. SHERRI L WALSH
 Full Name (Last, First, Middle Initial)
 Mailing Address 958 WOODVIEW CIRCLE
 City State Zip Code
 CARVER MN 55315-4519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2575050641528
 Amount of Each Receipt this Period
 86.94
 Memo Item
 P/R Deduction (\$43.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	665.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial) A. VIVIAN M LINDSAY			Date of Receipt MM / DD / YYYY 05 / 31 / 2016
Mailing Address 14930 SW 39 ST			Transaction ID : PR2575054941528
City DAVIE	State FL	Zip Code 33331-2767	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer United HealthCare Services Inc	Occupation SVP Ops		P/R Deduction (\$96.15 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.43		

Full Name (Last, First, Middle Initial) B. CARY J MCCARTY			Date of Receipt MM / DD / YYYY 05 / 31 / 2016
Mailing Address 8800 RUMFIELD RD			Transaction ID : PR2575059441528
City NORTH RICHLAND HILLS	State TX	Zip Code 76182-6131	Amount of Each Receipt this Period 78.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer United HealthCare Services Inc	Occupation VP Gen Mgmt		P/R Deduction (\$39.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

Full Name (Last, First, Middle Initial) C. SANDRA B NICHOLS			Date of Receipt MM / DD / YYYY 05 / 31 / 2016
Mailing Address 12706 YOUNG LANE			Transaction ID : PR2575074541528
City NORTH POTOMAC	State MD	Zip Code 20878-6112	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer United HealthCare Services Inc	Occupation Shared Svs Regn CMO		P/R Deduction (\$96.15 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 961.50		

SUBTOTAL of Receipts This Page (optional).....▶	462.60
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KAREN A UPCHURCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5780 VICTORIA CT
 City WESTERVILLE State OH Zip Code 43082-8680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.20

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575084441528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. PHEBE M CHAMPION
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 REYBURN DRIVE
 City HENDERSON State NV Zip Code 89074-2760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Plan of Nevada Occupation Dir Cust Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575108341528
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. PATRICK J DEWALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 7662 RIDGEVIEW WAY
 City CHANHASSEN State MN Zip Code 55317-4507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Deputy Gen Counsel Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 568.15

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575145341528
 Amount of Each Receipt this Period 227.26
 Memo Item
 P/R Deduction (\$113.63 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	354.18
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RON JONES
Full Name (Last, First, Middle Initial)

Mailing Address 10066 ESCAMBIA BAY CT

City NAPLES State FL Zip Code 34120-4621

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum360 Services Inc Occupation SVP Clnt Relationship

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575163541528

Amount of Each Receipt this Period 250.00

Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

B. SCOTT G CASSANO
Full Name (Last, First, Middle Initial)

Mailing Address 4855 BUCKHORN BUTTE COURT

City LAS VEGAS State NV Zip Code 89149-5258

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Plan of Nevada Occupation Dir Prov Svc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575164441528

Amount of Each Receipt this Period 200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

C. CHAD A HAMANN
Full Name (Last, First, Middle Initial)

Mailing Address 7638 RIDGEVIEW WAY

City CHANHASSEN State MN Zip Code 55317-4507

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575170141528

Amount of Each Receipt this Period 90.90

Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.90

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THOMAS J MCGUIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 CUMBERLAND ROAD
 City WEST HARTFORD State CT Zip Code 06119-1121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Sr Deputy Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1483.55

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575185441528
 Amount of Each Receipt this Period 439.54
 Memo Item
 P/R Deduction (\$219.77 Bi-Weekly)

B. MICHAEL PATRICK STAMM
 Full Name (Last, First, Middle Initial)
 Mailing Address 6721 MOSSY GLEN DR
 City FORT MYERS State FL Zip Code 33908-4771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575194641528
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

C. MITCHELL W GRANBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 6721 GALWAY DRIVE
 City EDINA State MN Zip Code 55439-1313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.37

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575196141528
 Amount of Each Receipt this Period 214.94
 Memo Item
 P/R Deduction (\$107.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	734.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KEVIN B FRANCIS
Full Name (Last, First, Middle Initial)

Mailing Address 15815 MINNETONKA BLVD

City MINNETONKA State MN Zip Code 55345-1410

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Acct Svs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.05

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575203341528

Amount of Each Receipt this Period 95.22

Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

B. MATTHEW MACKINNON SHORS
Full Name (Last, First, Middle Initial)

Mailing Address 4649 EWING AVENUE SOUTH

City MINNEAPOLIS State MN Zip Code 55410-1745

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Sr Deputy Gen Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1455.44

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575222341528

Amount of Each Receipt this Period 428.30

Memo Item

P/R Deduction (\$214.15 Bi-Weekly)

C. HOWARD CHARLES GILPIN JR
Full Name (Last, First, Middle Initial)

Mailing Address 1210 SHEPARD DRIVE

City BLUE BELL State PA Zip Code 19422-3481

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Dir Act Cnslt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575224941528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	601.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THOMAS C CHOATE
Full Name (Last, First, Middle Initial)
Mailing Address 8222 STONE MASON CT
City WINDERMERE State FL Zip Code 34786-5624
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Regn CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575247841528
Amount of Each Receipt this Period 76.92
 Memo Item
P/R Deduction (\$38.46 Bi-Weekly)

B. PRASANNA SHETTY
Full Name (Last, First, Middle Initial)
Mailing Address 41 HOYA ST
City RANCHO MISSION VIEJO State CA Zip Code 92694-1283
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation Mgr IT Sys Anlys
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 227.25

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575252041528
Amount of Each Receipt this Period 90.90
 Memo Item
P/R Deduction (\$45.45 Bi-Weekly)

C. THOMAS RAYMOND BEAUREGARD
Full Name (Last, First, Middle Initial)
Mailing Address 161 SPRING VALLEY ROAD
City RIDGEFIELD State CT Zip Code 06877-1219
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation SVP Innovation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1730.90

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575295141528
Amount of Each Receipt this Period 384.60
 Memo Item
P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 552.42
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BARBARA CORN
Full Name (Last, First, Middle Initial)
Mailing Address 4430 KERTH MANOR DR
City SAINT LOUIS State MO Zip Code 63128-3156
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation VP Med Clin Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 238.05

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575297341528
Amount of Each Receipt this Period 95.22
 Memo Item
P/R Deduction (\$47.61 Bi-Weekly)

B. BRANDON E CUEVAS
Full Name (Last, First, Middle Initial)
Mailing Address 25 STRATHMORE
City LADERA RANCH State CA Zip Code 92694-0549
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Regn CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575305641528
Amount of Each Receipt this Period 384.60
 Memo Item
P/R Deduction (\$192.30 Bi-Weekly)

C. BRADLEY W HUNT
Full Name (Last, First, Middle Initial)
Mailing Address 6636 W SHORE DR
City EDINA State MN Zip Code 55435-1529
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Bus Segment CMO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 909.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575310441528
Amount of Each Receipt this Period 198.88
 Memo Item
P/R Deduction (\$99.44 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	678.70
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JEFFREY A GOLDBERG
Full Name (Last, First, Middle Initial)

Mailing Address 3410 BRADLEY LANE

City CHEVY CHASE State MD Zip Code 20815-3262

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VP Business Development Exe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575326941528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

B. COLLEEN HASTINGS VAN HAM
Full Name (Last, First, Middle Initial)

Mailing Address 727 N EVERGREEN AVE

City ARLINGTON HEIGHTS State IL Zip Code 60004-5566

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575341941528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. MICHAEL J TELESKY
Full Name (Last, First, Middle Initial)

Mailing Address 2602 PENNINGTON PLACE

City VALPARAISO State IN Zip Code 46383-9163

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation KA VP SIs Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575350941528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.92

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. YASMINE WINKLER
Full Name (Last, First, Middle Initial)

Mailing Address 1429 WEST WIGWAM TRAIL

City MOUNT PROSPECT State IL Zip Code 60056-2940

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.18

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575390941528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. CRAIG L BRATTEBO
Full Name (Last, First, Middle Initial)

Mailing Address 10202 HARMONY CIRCLE

City EDEN PRAIRIE State MN Zip Code 55347-5019

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 681.78

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575397241528

Amount of Each Receipt this Period 227.26

Memo Item

P/R Deduction (\$113.63 Bi-Weekly)

C. JERI L LOSE
Full Name (Last, First, Middle Initial)

Mailing Address 9995 DELL ROAD

City EDEN PRAIRIE State MN Zip Code 55347-3524

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Info Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575419841528

Amount of Each Receipt this Period 200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 504.18

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KEVIN M MCGAVICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 705 NOTTINGHAM COURT
 City CRANBERRY TOWNSHIP State PA Zip Code 16066-6527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation C&S RVP Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575421941528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. KARIN R O'HARA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1431 HENRY COURT
 City CHANHASSEN State MN Zip Code 55317-2200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Acctng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575428741528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. EFREM CASTILLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 JOLIET AVE
 City SAN ANTONIO State TX Zip Code 78209-5243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation NA Med Dir/CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1136.35

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575441341528
 Amount of Each Receipt this Period 454.54
 Memo Item
 P/R Deduction (\$227.27 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	608.38
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. TIMOTHY M SPILKER
Full Name (Last, First, Middle Initial)

Mailing Address 9801 MOHAWK LANE

City LEAWOOD State KS Zip Code 66206-2432

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : PR2575446341528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. MILLA HAUTMAN
Full Name (Last, First, Middle Initial)

Mailing Address 410 SYCAMORE CIRCLE

City PLYMOUTH State MN Zip Code 55441-5667

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Chief Tech Off

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 722.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : PR2575447141528

Amount of Each Receipt this Period 222.16

Memo Item

P/R Deduction (\$111.08 Bi-Weekly)

C. JOHN M HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 216 STELLA GOLD

City BUDA State TX Zip Code 78610-3632

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Assc Dir Service Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 865.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : PR2575489441528

Amount of Each Receipt this Period 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	491.38
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MATTHEW E KLEIN
Full Name (Last, First, Middle Initial)

Mailing Address 6608 SCANDIA ROAD

City EDINA State MN Zip Code 55439-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.83

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2575517341528

Amount of Each Receipt this Period
217.38

Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

B. MOLLY E JOSEPH
Full Name (Last, First, Middle Initial)

Mailing Address 2711 CRESCENT RIDGE ROAD

City MINNETONKA State MN Zip Code 55305-2809

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1920.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2575521741528

Amount of Each Receipt this Period
384.00

Memo Item

P/R Deduction (\$192.00 Bi-Weekly)

C. PAUL B HEBERT
Full Name (Last, First, Middle Initial)

Mailing Address 13 GOVERNORS ROW

City WEST HARTFORD State CT Zip Code 06117-1931

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Fin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2575522341528

Amount of Each Receipt this Period
250.00

Memo Item

P/R Deduction (\$125.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	851.38
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KRISTEN NOEL ANDERSON HOLOVIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4610 LAKEVIEW DRIVE
 City EDINA State MN Zip Code 55424-1518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Deputy Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.37

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575533041528
 Amount of Each Receipt this Period 214.94
 Memo Item
 P/R Deduction (\$107.47 Bi-Weekly)

B. JANE B HILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 34301 299TH PLACE
 City AITKIN State MN Zip Code 56431-5914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Compli
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.29

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575533141528
 Amount of Each Receipt this Period 86.94
 Memo Item
 P/R Deduction (\$43.47 Bi-Weekly)

C. THOMAS A HAMLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2800 NEWMAN
 City HOUSTON State TX Zip Code 77098-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Sr Behvrl Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575536241528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	378.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. HOLLY STEINBRECHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 11053 POTOMAC LANE
 City FRISCO State TX Zip Code 75035-1226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 648.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575544541528
 Amount of Each Receipt this Period 231.40
 Memo Item
 P/R Deduction (\$115.70 Bi-Weekly)

B. CURTIS A MOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 KELTON STREET
 City REHOBOTH State MA Zip Code 02769-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Sr Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.83

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575579241528
 Amount of Each Receipt this Period 217.38
 Memo Item
 P/R Deduction (\$108.69 Bi-Weekly)

C. ELIZABETH C WINSOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 WILDERS PASS
 City CANTON State CT Zip Code 06019-2259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation CEO NA Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1529.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575582841528
 Amount of Each Receipt this Period 419.58
 Memo Item
 P/R Deduction (\$209.79 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	868.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. EUGENE M HARRIS
Full Name (Last, First, Middle Initial)

Mailing Address 2927 SHADY VIEW DR

City HIGH POINT State NC Zip Code 27265-8230

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Medicr Brkr Dist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.05

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575585441528

Amount of Each Receipt this Period 95.22

Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

B. MICHAEL PETEROY
Full Name (Last, First, Middle Initial)

Mailing Address 1004 PHILLIPS STREET

City VISTA State CA Zip Code 92083-7171

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Dir Bus Process

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 877.83

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575585641528

Amount of Each Receipt this Period 217.38

Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

C. KATHLEEN DWYER
Full Name (Last, First, Middle Initial)

Mailing Address 4852 EXCALIBUR DRIVE

City SYRACUSE State NY Zip Code 13215-9317

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Assc Dir Comm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575590641528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 389.52

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 147
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LISA M IVERSON
Full Name (Last, First, Middle Initial)

Mailing Address 13341 CARRACH AVENUE

City ROSEMOUNT State MN Zip Code 55068-4774

FEC ID number of contributing federal political committee. **C**

Name of Employer: United HealthCare Services Inc
Occupation: Bus Segment CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1643.34

Date of Receipt: 05 / 31 / 2016
Transaction ID : PR2575603241528

Amount of Each Receipt this Period: 419.58

Memo Item

P/R Deduction (\$209.79 Bi-Weekly)

B. DIANE L MCNUTT
Full Name (Last, First, Middle Initial)

Mailing Address 11524 ZION ROAD

City BLOOMINGTON State MN Zip Code 55437-3636

FEC ID number of contributing federal political committee. **C**

Name of Employer: United HealthCare Services Inc
Occupation: VP Human Capital Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1475.52

Date of Receipt: 05 / 31 / 2016
Transaction ID : PR2575604541528

Amount of Each Receipt this Period: 440.56

Memo Item

P/R Deduction (\$220.28 Bi-Weekly)

C. BRIAN R THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 17829 63RD AVE N

City MAPLE GROVE State MN Zip Code 55311-4650

FEC ID number of contributing federal political committee. **C**

Name of Employer: United HealthCare Services Inc
Occupation: Bus Segment CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4384.60

Date of Receipt: 05 / 31 / 2016
Transaction ID : PR2575634641528

Amount of Each Receipt this Period: 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	937.06
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. TERRENCE M CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 COOPER AVENUE
 City EDINA State MN Zip Code 55436-1315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Bus Segment CMO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1724.11**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2575636941528
 Amount of Each Receipt this Period **409.46**
 Memo Item
 P/R Deduction (\$204.73 Bi-Weekly)

B. BENTON V DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 9825 NORTH 53RD PLACE
 City PARADISE VALLEY State AZ Zip Code 85253-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP GM Clin Comnty Ntwk
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **865.35**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2575639241528
 Amount of Each Receipt this Period **192.30**
 Memo Item
 P/R Deduction (\$258.41 Bi-Weekly)

C. CRAIG S HERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 9609 WYOMING CIRCLE
 City BLOOMINGTON State MN Zip Code 55438-1628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1021.21**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2575650241528
 Amount of Each Receipt this Period **526.44**
 Memo Item
 P/R Deduction (\$248.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1128.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. RONALD GONG
Full Name (Last, First, Middle Initial)

Mailing Address 2240 SOUTH MOON VIEW DRIVE

City HACIENDA HEIGHTS State CA Zip Code 91745-5739

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation M R Sls Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575651541528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

B. ELENA J MCFANN
Full Name (Last, First, Middle Initial)

Mailing Address 18925 24TH AVENUE NORTH

City PLYMOUTH State MN Zip Code 55447-2072

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1384.65

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575654741528

Amount of Each Receipt this Period 451.90

Memo Item

P/R Deduction (\$225.95 Bi-Weekly)

C. JANICE C ZIGLER
Full Name (Last, First, Middle Initial)

Mailing Address 21 TREVINO CIRCLE

City ANGEL FIRE State NM Zip Code 87710

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Regn Pres Ntwk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1363.62

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575665641528

Amount of Each Receipt this Period 454.54

Memo Item

P/R Deduction (\$227.27 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	984.44
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CARL E ALLEN
Full Name (Last, First, Middle Initial)

Mailing Address 8675 AZURE SKY DRIVE

City LAS VEGAS State NV Zip Code 89129-2227

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Medical Assoc. Inc. Occupation Sr Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : PR2575669341528

Amount of Each Receipt this Period
 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

B. PATRICK MOESCHLER
Full Name (Last, First, Middle Initial)

Mailing Address 10940 E TIERRA DR

City SCOTTSDALE State AZ Zip Code 85259-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer UNITED HEALTHCARE SVS INC Occupation KA VP Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : PR2575676141528

Amount of Each Receipt this Period
 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

C. CHRISTOPHER J STIDMAN
Full Name (Last, First, Middle Initial)

Mailing Address 6504 CHEROKEE TRAIL

City EDINA State MN Zip Code 55439-1109

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VP Clnt Relationship

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1573.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : PR2575683841528

Amount of Each Receipt this Period
 428.30

Memo Item

P/R Deduction (\$214.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	584.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. PAMELA J STAHL
Full Name (Last, First, Middle Initial)

Mailing Address 1313 N FRANKLIN PLACE #705

City MILWAUKEE	State WI	Zip Code 53202-2983
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Hlth Plan CEO
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2575685341528

Amount of Each Receipt this Period
90.90

Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

B. STEPHEN J FARRELL
Full Name (Last, First, Middle Initial)

Mailing Address 50 MAJOR DOANE RD

City WELLFLEET	State MA	Zip Code 02667-7836
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Hlth Plan CEO
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2575696241528

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. ELIZABETH SOBERG PROCKOCKI
Full Name (Last, First, Middle Initial)

Mailing Address 9746 SUNSET HILL DR

City LONE TREE	State CO	Zip Code 80124-6720
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc	Occupation Hlth Plan CEO
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
865.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2575705841528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	360.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. D ELLEN WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 400 STUART STREET
25D

City BOSTON State MA Zip Code 02116-5011

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation EVP Human Capital

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1645.78

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2575708841528

Amount of Each Receipt this Period
419.26

Memo Item

P/R Deduction (\$209.63 Bi-Weekly)

B. MOLLY LOUISE KNORR
Full Name (Last, First, Middle Initial)

Mailing Address 1144 PROSPECT AVENUE

City HARTFORD State CT Zip Code 06105-1124

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Risk Adjustment

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2575735441528

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. JESSICA C KRAL
Full Name (Last, First, Middle Initial)

Mailing Address 4358 COOLIDGE AVE

City SAINT LOUIS PARK State MN Zip Code 55424-1020

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.05

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2575736141528

Amount of Each Receipt this Period
95.22

Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	591.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. GINA L CESARETTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 5020 CIRCLE DOWN
 City GOLDEN VALLEY State MN Zip Code 55416-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Deputy Gen Counsel Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 652.14

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575739041528
 Amount of Each Receipt this Period 217.38
 Memo Item
 P/R Deduction (\$108.69 Bi-Weekly)

B. CARRIE J MAURER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2899 EDGEWATER COVE
 City WOODBURY State MN Zip Code 55125-8705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Mktg
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575798141528
 Amount of Each Receipt this Period 218.18
 Memo Item
 P/R Deduction (\$109.09 Bi-Weekly)

C. ADAM C HJERPE
 Full Name (Last, First, Middle Initial)
 Mailing Address 13932 UTAH AVE S
 City SAVAGE State MN Zip Code 55378-2159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Chief of Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1521.73

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575806241528
 Amount of Each Receipt this Period 434.78
 Memo Item
 P/R Deduction (\$217.39 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	870.34
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LAURIE ERIN RUSSELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3108 SONIA DRIVE
 City LAS VEGAS State NV Zip Code 89107-3246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575812141528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

B. SAMUEL JAMES MECKEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1828 WYNDAM DRIVE
 City SHAKOPEE State MN Zip Code 55379-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1861.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575814541528
 Amount of Each Receipt this Period 392.30
 Memo Item
 P/R Deduction (\$196.15 Bi-Weekly)

C. WILLIAM J MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 27409 W 108 STREET
 City OLATHE State KS Zip Code 66061-7533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 884.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575819841528
 Amount of Each Receipt this Period 176.94
 Memo Item
 P/R Deduction (\$88.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	647.24
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ELLEN R SEXTON
Full Name (Last, First, Middle Initial)

Mailing Address 15346 FISH POINT ROAD

City PRIOR LAKE State MN Zip Code 55372-1948

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Growth Strat & Sls Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575823241528

Amount of Each Receipt this Period 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. RICK E MCNATT
Full Name (Last, First, Middle Initial)

Mailing Address 125 WHITNEY VALLEY WALK

City JOHNS CREEK State GA Zip Code 30097-2462

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Sls Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575824941528

Amount of Each Receipt this Period 90.90

Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

C. PHILIP R KAUFMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1680 NORTH FARM ROAD

City ORONO State MN Zip Code 55356-9309

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation CEO Spclty Ben Visn

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1028.05

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575829841528

Amount of Each Receipt this Period 246.50

Memo Item

P/R Deduction (\$123.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 529.70

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MICHELLE M HUNTLEY
Full Name (Last, First, Middle Initial)

Mailing Address 19503 HARMONY AVE

City State Zip Code
ROGERS MN 55374-4843

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Deputy Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
841.14

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : PR2575832041528

Amount of Each Receipt this Period
207.36

Memo Item

P/R Deduction (\$103.68 Bi-Weekly)

B. MARY JANE BEESON
Full Name (Last, First, Middle Initial)

Mailing Address 279 OAK COMMON AVENUE

City State Zip Code
SAINT AUGUSTINE FL 32095-6803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc Bus Adv/Tech Cnslt Sr Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
924.60

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : PR2575839541528

Amount of Each Receipt this Period
196.92

Memo Item

P/R Deduction (\$98.46 Bi-Weekly)

C. EDWARD JOHN SKOPAS
Full Name (Last, First, Middle Initial)

Mailing Address 43 JOEL DR

City State Zip Code
HEBRON CT 06248-1245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Mkt Grp CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : PR2575842741528

Amount of Each Receipt this Period
78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	482.28
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WILLIAM J GOLDEN
Full Name (Last, First, Middle Initial)

Mailing Address 106 SOUND COURT

City NORTHPORT State NY Zip Code 11768-3527

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Regn CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **865.45**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : PR2575859341528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. NYLE BRENT COTTINGTON
Full Name (Last, First, Middle Initial)

Mailing Address 6630 EMPIRE COURT

City MAPLE GROVE State MN Zip Code 55311-3433

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Acctng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **317.52**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : PR2575865341528

Amount of Each Receipt this Period
85.32

Memo Item

P/R Deduction (\$42.66 Bi-Weekly)

C. PAYMAN PEZHMAN
Full Name (Last, First, Middle Initial)

Mailing Address 17920 SHAVERS LAKE DRIVE

City WAYZATA State MN Zip Code 55391-3333

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Bus Segment Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.83**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : PR2575883541528

Amount of Each Receipt this Period
217.38

Memo Item

P/R Deduction (\$108.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	495.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 147
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. PATRICK J LANGAN
Full Name (Last, First, Middle Initial)

Mailing Address 405 MEADOW LANE

City BENSON State MN Zip Code 56215-1033

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 970.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575885041528

Amount of Each Receipt this Period 194.00

Memo Item

P/R Deduction (\$97.00 Bi-Weekly)

B. MICHAEL W MEDEIROS
Full Name (Last, First, Middle Initial)

Mailing Address 7112 LANGMUIR DRIVE

City MCKINNEY State TX Zip Code 75071-4606

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Clnt Mgmt NA Accts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575930641528

Amount of Each Receipt this Period 78.00

Memo Item

P/R Deduction (\$39.00 Bi-Weekly)

C. RICHARD J MATTERA
Full Name (Last, First, Middle Initial)

Mailing Address 483 HIGHCROFT ROAD

City WAYZATA State MN Zip Code 55391-1548

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Mkt Group Gen Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575938441528

Amount of Each Receipt this Period 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	656.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JUDITH GAGER PERLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 CANTERBURY LANE
 PO BOX 2108
 City VINEYARD HAVEN State MA Zip Code 02568-5659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.20

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575968941528
 Amount of Each Receipt this Period 132.60
 Memo Item
 P/R Deduction (\$66.30 Bi-Weekly)

B. MARK LEENAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 UNION TERRACE LN N
 City PLYMOUTH State MN Zip Code 55441-6232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UHC International Services Inc Occupation NA Med Dir/CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2575982841528
 Amount of Each Receipt this Period 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

C. DAVID SANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8326 ELKO DRIVE
 City ELLICOTT CITY State MD Zip Code 21043-6913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.14

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576026441528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	287.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JAY WARMUTH
Full Name (Last, First, Middle Initial)

Mailing Address 16215 GRABEN COURT

City EDEN PRAIRIE State MN Zip Code 55346-2331

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Bus Segment Gen Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576040041528

Amount of Each Receipt this Period 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. GAYLE Q ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 39 CANYON RIDGE DRIVE

City SANDIA PARK State NM Zip Code 87047-8509

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Strategic Acct Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 865.43

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576040341528

Amount of Each Receipt this Period 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

C. KEVIN P KANDALRAFT
Full Name (Last, First, Middle Initial)

Mailing Address 4189 WINDSOR POINT PLACE

City EL DORADO HILLS State CA Zip Code 95762-3797

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576043641528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 461.52

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KENT MONICAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 9795 E PIEDRA DRIVE
 City SCOTTSDALE State AZ Zip Code 85255-9231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Prd
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.18

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576051341528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. RESTOR JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 CRESCENT RIDGE ROAD
 City MINNETONKA State MN Zip Code 55305-2806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Entrprs Real Estate Svs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 970.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576051641528
 Amount of Each Receipt this Period 194.00
 Memo Item
 P/R Deduction (\$97.00 Bi-Weekly)

C. JOHN F REX
 Full Name (Last, First, Middle Initial)
 Mailing Address 503 HARRINGTON ROAD
 City WAYZATA State MN Zip Code 55391-1512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Mkt Group CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1924.40

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576060041528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	655.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOSHUA M MCEWAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4711 WEST 28TH STREET
 City SAINT LOUIS PARK State MN Zip Code 55416-1927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576085741528
 Amount of Each Receipt this Period 90.90
 Memo Item
 P/R Deduction (\$45.45 Bi-Weekly)

B. DARRIN D JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 BERTON COURT
 City MIDDLETOWN State DE Zip Code 19709-9932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Hlth Plan CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.17

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576103741528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. CHRIS KENT
 Full Name (Last, First, Middle Initial)
 Mailing Address 13273 CARLINGFORD LANE
 City ROSEMOUNT State MN Zip Code 55068-6308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576119041528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	244.74
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CHANDRA LUE TORGERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5433 10TH AVENUE SOUTH
 City State Zip Code
 MINNEAPOLIS MN 55417-2413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2576128641528
 Amount of Each Receipt this Period
 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

B. STEVEN H NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 640 LOCUST HILLS DRIVE
 City State Zip Code
 WAYZATA MN 55391-1973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Bus Segment CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2576144841528
 Amount of Each Receipt this Period
 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. JOHN E FRIDNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 782 PENFIELD DR
 City State Zip Code
 CAROL STREAM IL 60188-4738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc SB NA VP Sis/Gen
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2576147541528
 Amount of Each Receipt this Period
 78.00
 Memo Item
 P/R Deduction (\$39.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	540.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THOMAS L ELLIOTT III
 Full Name (Last, First, Middle Initial)
 Mailing Address 1880 SUGARLOAF CLUB DR
 City DULUTH State GA Zip Code 30097-7451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Clnt Relationship
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2576313341528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

B. DANIEL J KENIRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5553 LITTLE FALLS ROAD
 City ARLINGTON State VA Zip Code 22207-1525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Govt Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2577379341528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. DEMETRIOS L KOUZOUKAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 15552 57TH PLACE N
 City PLYMOUTH State MN Zip Code 55446-3737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Bus Segment Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2578740441528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	769.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KRISTY O DUFFEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8906 WINGED FOOT DRIVE
 City PASADENA State MD Zip Code 21122-6670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Clnt Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 673.05

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2578823241528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

B. LAURA CIAVOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1686 WILDFIRE LANE
 City FRISCO State TX Zip Code 75033-7325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2578824341528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. NATHANAEL BUSBEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 ORPINGTON RD
 City BALTIMORE State MD Zip Code 21229-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Bus Process
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.14

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2578826741528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	653.82
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 147
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JAY J COHEN
Full Name (Last, First, Middle Initial)
Mailing Address 2613 VICTORIA DR
City LAGUNA BEACH State CA Zip Code 92651-3948
FEC ID number of contributing federal political committee. **C**
Name of Employer Optum Services, Inc Occupation CEO Med Grp Physn
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **865.45**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2578829641528
Amount of Each Receipt this Period **192.30**
 Memo Item
P/R Deduction (\$96.15 Bi-Weekly)

B. RACHEL C FARMER
Full Name (Last, First, Middle Initial)
Mailing Address 1929 ALBIZIA COURT
City BATON ROUGE State LA Zip Code 70808-3973
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **313.56**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2595208341528
Amount of Each Receipt this Period **85.80**
 Memo Item
P/R Deduction (\$42.90 Bi-Weekly)

C. ANTHONY S LONIGRO
Full Name (Last, First, Middle Initial)
Mailing Address 3186 WEST CANYON AVE
City SAN DIEGO State CA Zip Code 92123-5426
FEC ID number of contributing federal political committee. **C**
Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **272.70**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2595225841528
Amount of Each Receipt this Period **90.90**
 Memo Item
P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	369.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. LAURA A GROSCHE

Mailing Address **3872 KENNET CIRCLE**

City **EAGAN** State **MN** Zip Code **55123-3952**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Optum Services, Inc** Occupation **VP IT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1923.00**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2595230941528

Amount of Each Receipt this Period **384.60**

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. WESTON PRICE SCOTT

Mailing Address **1050 LAKE CAROLYN PKWY
APT 4349**

City **IRVING** State **TX** Zip Code **75039-3999**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Optum Services, Inc** Occupation **Med Dir**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.70**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2601125341528

Amount of Each Receipt this Period **61.54**

Memo Item

P/R Deduction (\$30.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. MARIANNE D SHORT

Mailing Address **2215 SUMMIT AVENUE**

City **SAINT PAUL** State **MN** Zip Code **55105-1002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **United HealthCare Services Inc** Occupation **EVP Gen Counsel**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1923.00**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2601133541528

Amount of Each Receipt this Period **384.60**

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	830.74
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 101 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial) A. AMY N SWANSON		Date of Receipt MM / DD / YYYY 05 / 31 / 2016
Mailing Address 621 SPARROW WAY		Transaction ID : PR2601140741528
City WADSWORTH	State OH	Zip Code 44281-7716
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 192.30	
Name of Employer United HealthCare Services Inc	Occupation Dir Mktg Bus Dev	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.38	P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JENNIFER M MARDOSZ		Date of Receipt MM / DD / YYYY 05 / 31 / 2016
Mailing Address 17920 SHAVERS LANE		Transaction ID : PR2601142041528
City WAYZATA	State MN	Zip Code 55391-2737
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 214.94	
Name of Employer Optum Services, Inc	Occupation Deputy Gen Counsel	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.37	P/R Deduction (\$107.47 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. MICHAEL A CHRIST		Date of Receipt MM / DD / YYYY 05 / 31 / 2016
Mailing Address 89 RIDGEWOOD ROAD		Transaction ID : PR2601156941528
City WEST HARTFORD	State CT	Zip Code 06107-2924
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.92	
Name of Employer United HealthCare Services Inc	Occupation Dir Govt Affs	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	484.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ANDREW W TICE JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1136 JACKSON SPRINGS RD
 City MACON State GA Zip Code 31211-1435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Phys Advsr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.79

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2601160941528
 Amount of Each Receipt this Period 46.14
 Memo Item
 P/R Deduction (\$23.07 Bi-Weekly)

B. MARC GORDON KAPROW
 Full Name (Last, First, Middle Initial)
 Mailing Address 5079 SW 89TH AVE
 City COOPER CITY State FL Zip Code 33328-3636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Exec Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2601179041528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. KELLY MARIE DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4445 36TH ST S
 City ARLINGTON State VA Zip Code 22206-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.26

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2605734241528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	199.98
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. TRACY MALONE

Mailing Address 900 S 22ND ST

City ARLINGTON State VA Zip Code 22202-2625

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP External Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1717.88

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2605736941528

Amount of Each Receipt this Period
410.24

Memo Item

P/R Deduction (\$205.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. GLORIA AUSTIN

Mailing Address 1547 HARVARD AVENUE

City SALT LAKE CITY State UT Zip Code 84105-1725

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation SVP Bus Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
865.47

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2605757441528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. MICHAEL E WEISSEL

Mailing Address 99 HAGEN ROAD

City NEWTON State MA Zip Code 02459-2731

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Optum Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1699.26

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2606842941528

Amount of Each Receipt this Period
412.58

Memo Item

P/R Deduction (\$206.29 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1015.12

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOHN MATTHEW MATECZUN
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 SAINT GEORGE BARBER ROAD
 City State Zip Code
 DAVIDSONVILLE MD 21035-1348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Pres M&V
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1730.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2606845141528
 Amount of Each Receipt this Period
 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. THOMAS KARL ZIESMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2004 ESTES PARK ROAD
 City State Zip Code
 SOUTHLAKE TX 76092-3855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc SVP Ops
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 865.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2606854441528
 Amount of Each Receipt this Period
 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

C. SHELLEY L KENNEDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 706 SUE BARNETT
 City State Zip Code
 HOUSTON TX 77018-5412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Service Acct Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2607803041528
 Amount of Each Receipt this Period
 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	676.90
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LISA MARIE LANDO
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 PINEAPPLE STREET
 APT 3J
 City BROOKLYN State NY Zip Code 11201-6839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.18

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2608059541528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. VIRGINIA A FLYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 VAN TERRACE
 City SPARKILL State NY Zip Code 10976-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.18

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2608061241528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. SANDRA FERGUSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 SOUTH SHERATON DRIVE
 City AKRON State OH Zip Code 44319-1918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Assc Dir Med Clin Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.18

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2608061941528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	230.76
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. NORMAN L WRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 1507 NANTUCKET DRIVE

City HOUSTON State TX Zip Code 77057-1911

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation SVP Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1861.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2609812341528

Amount of Each Receipt this Period 392.30

Memo Item

P/R Deduction (\$196.15 Bi-Weekly)

B. MICHAEL BAKER
Full Name (Last, First, Middle Initial)

Mailing Address 2383 HIGHOVER TRAIL

City CHANHASSEN State MN Zip Code 55317-4744

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Cust Svs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2612530541528

Amount of Each Receipt this Period 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

C. NATASHA DECKMANN
Full Name (Last, First, Middle Initial)

Mailing Address 133 WEST 22 STREET #6F

City NEW YORK State NY Zip Code 10011-2783

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VP Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2612534641528

Amount of Each Receipt this Period 200.00

Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 784.60

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. ABIGAIL LONDON VAIL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3636 DEXTER DRIVE
 City TALLAHASSEE State FL Zip Code 32312-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2614315641528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. RANDALL L SOLOMON
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 HAIGHT STREET
 City SAN FRANCISCO State CA Zip Code 94117-3317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Sr Behvrl Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.22

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2615671541528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. MICHAEL BIRNBAUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 DEAN STREET
 City BROOKLYN State NY Zip Code 11201-6245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.22

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2615671641528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	230.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KAREN E PUEHLER
Full Name (Last, First, Middle Initial)

Mailing Address 3741 E DONALD DRIVE

City PHOENIX State AZ Zip Code 85050-7369

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Med Clin Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.29

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2615679441528

Amount of Each Receipt this Period 86.94

Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

B. ELIZABETH S NIEMYER
Full Name (Last, First, Middle Initial)

Mailing Address 9237 ENGLISH MEADOW WAY

City LAYTONSVILLE State MD Zip Code 20882-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1475.52

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2615682841528

Amount of Each Receipt this Period 440.56

Memo Item

P/R Deduction (\$220.28 Bi-Weekly)

C. KEVIN JON TRAW
Full Name (Last, First, Middle Initial)

Mailing Address 518 13TH ST

City HUNTINGTON BEACH State CA Zip Code 92648-4038

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Dir Bus Process

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2617365641528

Amount of Each Receipt this Period 90.90

Memo Item

P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	618.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MARK OWEN JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 8687 RILEY CURVE

City CHANHASSEN State MN Zip Code 55317-4822

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VP Ntwk Contrctng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2617933941528

Amount of Each Receipt this Period 92.30

Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

B. BRIAN WENGER
Full Name (Last, First, Middle Initial)

Mailing Address 818 GOODRICH AVE

City SAINT PAUL State MN Zip Code 55105-3345

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Mkt Group Gen Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1521.73

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2623703341528

Amount of Each Receipt this Period 434.78

Memo Item

P/R Deduction (\$217.39 Bi-Weekly)

C. REBECCA HUMBERT MULES
Full Name (Last, First, Middle Initial)

Mailing Address 660 DOVER STREET

City BALTIMORE State MD Zip Code 21230-2228

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.20

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2624442641528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 604.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JENIFER JEAN FULLER JESSEP
 Full Name (Last, First, Middle Initial)
 Mailing Address 14320 KEITH COURT
 City BROOMFIELD State CO Zip Code 80023-9584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2624445441528
 Amount of Each Receipt this Period 115.38
 Memo Item
 P/R Deduction (\$57.69 Bi-Weekly)

B. CHRISTOPHER LOUIS COLLETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 786 CAMBERWELL DRIVE
 City EAGAN State MN Zip Code 55123-3939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation SVP UnitedHlth Grp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.17

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2625499541528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. TAMI RELLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6600 LONDONDERRY DRIVE
 City EDINA State MN Zip Code 55436-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Optum Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.52

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2625501941528
 Amount of Each Receipt this Period 555.52
 Memo Item
 P/R Deduction (\$277.76 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	747.82
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. WESLEY RYAN COWEN
Full Name (Last, First, Middle Initial)

Mailing Address 825 VIRGINIA PARK CIRCLE NE

City	State	Zip Code
ATLANTA	GA	30306-4081

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	KA Dir Acct Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2625532341528

Amount of Each Receipt this Period

76.92

 Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. GREGORY M HINES
Full Name (Last, First, Middle Initial)

Mailing Address 3660 SILVERWOOD RD

City	State	Zip Code
WEST SACRAMENTO	CA	95691-5403

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	Dir Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.14**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2626886541528

Amount of Each Receipt this Period

76.92

 Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. BRYAN C EBENSTEINER
Full Name (Last, First, Middle Initial)

Mailing Address 10495 OLYMPIC CIRCLE

City	State	Zip Code
EDEN PRAIRIE	MN	55347-2933

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United HealthCare Services Inc	VP Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR2626912241528

Amount of Each Receipt this Period

192.30

 Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	346.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CRAIG RANHEIM
Full Name (Last, First, Middle Initial)

Mailing Address 5228 ABBOTT AVENUE SOUTH

City State Zip Code
MINNEAPOLIS MN 55410-2125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Optum Services, Inc Dir Gen Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
238.05

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2628329341528

Amount of Each Receipt this Period
95.22

Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

B. LAMBERT VAN DER WALDE
Full Name (Last, First, Middle Initial)

Mailing Address 45 AUDUBON CAUSEWAY

City State Zip Code
LANTANA FL 33462-4756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc SVP Hlth Reform/Modernizatn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1923.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2628332341528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. LORI ANN RILEY
Full Name (Last, First, Middle Initial)

Mailing Address 5636 JAMES AVENUE SOUTH

City State Zip Code
MINNEAPOLIS MN 55419-1611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc VP Human Capital Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
961.50

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2628834041528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	672.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BRUCE MICHAEL JARVIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 18750 KIPHEART DRIVE
 City LEESBURG State VA Zip Code 20176-8220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Fin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2629554541528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. MING TED WONG
 Full Name (Last, First, Middle Initial)
 Mailing Address 21066 ASHLEY LANE
 City LAKE FOREST State CA Zip Code 92630-5867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.83

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2629556841528
 Amount of Each Receipt this Period 217.38
 Memo Item
 P/R Deduction (\$108.69 Bi-Weekly)

C. ELEANOR ADAMS HOFFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 CONNECTICUT AVE APT 701
 City WASHINGTON State DC Zip Code 20008-5312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2629559241528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	371.22
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. KIRSTEN GORSUCH
Full Name (Last, First, Middle Initial)

Mailing Address 2780 COUNTRYSIDE DRIVE WEST

City ORONO State MN Zip Code 55356-9676

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Comm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
961.50

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2632087841528

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. MICHAEL J TUFFIN
Full Name (Last, First, Middle Initial)

Mailing Address 5904 ASHBY MANOR PLACE

City ALEXANDRIA State VA Zip Code 22310-2267

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1923.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2632087941528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. JEFFREY D WALTER
Full Name (Last, First, Middle Initial)

Mailing Address 1490 SETTLER ST

City ELBURN State IL Zip Code 60119-7841

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Dir IT Architecture

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.60

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2632088841528

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	653.82
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. MARTHA R TEMPLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 194 LITTLE LANE
 City DURHAM State CT Zip Code 06422-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation VP Gen Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 681.78

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2632873641528
 Amount of Each Receipt this Period 227.26
 Memo Item
 P/R Deduction (\$113.63 Bi-Weekly)

B. LAWRENCE DAVID PLATT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3830 KING STREET
 City ALEXANDRIA State VA Zip Code 22302-1906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2632880741528
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. WADE HAPGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 330 NW 82ND
 City TOPEKA State KS Zip Code 66617-2223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2634167041528
 Amount of Each Receipt this Period 86.96
 Memo Item
 P/R Deduction (\$43.48 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	698.82
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 147
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. FLORA M CASTILLO

Mailing Address 202 N ROSBOROUGH AVE

City VENTNOR CITY State NJ Zip Code 08406-2022

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
865.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2634177941528

Amount of Each Receipt this Period
 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. JOHN M PRIBLE

Mailing Address 1923 SHIVER DR

City ALEXANDRIA State VA Zip Code 22307-1629

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
961.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2634656641528

Amount of Each Receipt this Period
 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. ADREAN ELISABETH SCHEID

Mailing Address 2700 WOODLEY ROAD NW #515

City WASHINGTON State DC Zip Code 20008-4154

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP External Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1153.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2634880441528

Amount of Each Receipt this Period
 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	769.20
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THOMAS PATRICK MCMAHON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1808 LAUDERDALE ROAD
 City LOUISVILLE State KY Zip Code 40205-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Mktg Bus Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2634885141528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

B. SARA M PESCATELLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1884 COLUMBIA ROAD NW APT #206
 City WASHINGTON State DC Zip Code 20009-5138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2634888541528
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

C. GREGORY L ACQUAVIVA
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 COLLINS AVENUE
 City BLOOMFIELD State NJ Zip Code 07003-4505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2635331941528
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	461.52
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. THOMAS EDWARD ROOS
Full Name (Last, First, Middle Initial)

Mailing Address 3199 KAGEN AVE NE

City SAINT MICHAEL State MN Zip Code 55376-3416

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation SVP Chief Acctng Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2635451241528

Amount of Each Receipt this Period 384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

B. ANNE CECKO
Full Name (Last, First, Middle Initial)

Mailing Address 3910 CRESTVIEW DRIVE

City EXCELSIOR State MN Zip Code 55331-9757

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Bus Process

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2636725841528

Amount of Each Receipt this Period 76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. SCOTT MARTIN ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 7019 TRUMPETER SWAN LANE

City MANASSAS State VA Zip Code 20112-3293

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Govt Affs Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 961.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2636726241528

Amount of Each Receipt this Period 192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	653.82
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 119 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. JOSE M BARRA
Full Name (Last, First, Middle Initial)

Mailing Address 9688 GEISLER ROAD

City EDEN PRAIRIE State MN Zip Code 55347-3562

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Optum Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1923.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2636728841528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

B. KENNETH JOHN SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 1200 WASHINGTON ST #202

City BOSTON State MA Zip Code 02118-2132

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation VP Gen Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
304.29

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2636734541528

Amount of Each Receipt this Period
86.94

Memo Item

P/R Deduction (\$43.47 Bi-Weekly)

C. BRETT LOGAN
Full Name (Last, First, Middle Initial)

Mailing Address 121 3RD STREET NE

City WASHINGTON State DC Zip Code 20002-7313

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Assc Dir Regl Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1730.70

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2638112741528

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	856.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. BENJAMIN HOWARD FRY
Full Name (Last, First, Middle Initial)

Mailing Address 3115 BRIARCLIFF GABLES CIRCLE

City ATLANTA State GA Zip Code 30329-2456

FEC ID number of contributing federal political committee. **C**

Name of Employer United HealthCare Services Inc Occupation Dir Govt Affs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2638114941528

Amount of Each Receipt this Period **76.92**

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. MICHAEL G ZEGLINSKI
Full Name (Last, First, Middle Initial)

Mailing Address 2533 RIVA RIDGE CT

City WEXFORD State PA Zip Code 15090-7958

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation VP Pharm Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1366.32**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2639701841528

Amount of Each Receipt this Period **455.44**

Memo Item

P/R Deduction (\$227.72 Bi-Weekly)

C. ROSS G LUCE JR
Full Name (Last, First, Middle Initial)

Mailing Address 1066 W GROVE CT

City GIBSONIA State PA Zip Code 15044-6068

FEC ID number of contributing federal political committee. **C**

Name of Employer Optum Services, Inc Occupation Dir Pharm Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.05**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR2639731441528

Amount of Each Receipt this Period **95.22**

Memo Item

P/R Deduction (\$47.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	627.58
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 121 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. CHRISTOPHER P SURRELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 DARTINGTON WAY
 City State Zip Code
 JOHNS CREEK GA 30022-8045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United HealthCare Services Inc Dir Mktg Bus Dev
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2639758141528
 Amount of Each Receipt this Period
 200.08
 Memo Item
 P/R Deduction (\$100.04 Bi-Weekly)

B. MARK A THIERER
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 EAST WALTON
 UNIT 4701
 City State Zip Code
 CHICAGO IL 60611-5441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc Bus Segment CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1346.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2639773641528
 Amount of Each Receipt this Period
 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. ELLEN RUTH NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 LAKESHORE DRIVE
 #3611
 City State Zip Code
 CHICAGO IL 60611-5157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Optum Services, Inc VP Bus Dvlp
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 272.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR2639795341528
 Amount of Each Receipt this Period
 90.90
 Memo Item
 P/R Deduction (\$45.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	675.58
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 147
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

A. LAMBERT ANTHONY WU
 Full Name (Last, First, Middle Initial)
 Mailing Address 11008 CHERWELL COURT
 City LAS VEGAS State NV Zip Code 89144-4526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Plan of Nevada Occupation Med Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.82

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2640461641528
 Amount of Each Receipt this Period 86.94
 Memo Item
 P/R Deduction (\$43.47 Bi-Weekly)

B. CHRISTINA L STOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 4709 ALTON PL NW
 City WASHINGTON State DC Zip Code 20016-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United HealthCare Services Inc Occupation VP External Affs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1521.66

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2640466441528
 Amount of Each Receipt this Period 434.76
 Memo Item
 P/R Deduction (\$217.38 Bi-Weekly)

C. JEFFREY BERKOWITZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 MORNINGSDRIVE
 City LIVINGSTON State NJ Zip Code 07039-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Optum Services, Inc Occupation Optum Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2640469241528
 Amount of Each Receipt this Period 416.66
 Memo Item
 P/R Deduction (\$208.33 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	938.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 123 OF 147
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)
A. ERIC A SCHUTT

Mailing Address 2675 TOWER ROAD

City State Zip Code
MC FARLAND WI 53558-9275

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc VP External Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : PR2640846241528

Amount of Each Receipt this Period
500.00

Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. RYAN J MINTO

Mailing Address 1505 HERITAGE CLUB AVE

City State Zip Code
WAKE FOREST NC 27587-7698

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United HealthCare Services Inc Dir Govt Affs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
238.10

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : PR2640882441528

Amount of Each Receipt this Period
95.24

Memo Item

P/R Deduction (\$47.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	595.24
TOTAL This Period (last page this line number only).....▶	75167.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of John McCain Inc

Mailing Address 228 S. Washington Street
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name

John McCain

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AZ District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444207

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Perlmutter For Congress

Mailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Contribution

Candidate Name

Rep. Edwin Perlmutter

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CO District: 07

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444208

Amount of Each Disbursement this Period

2000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Andy Barr for Congress, Inc.

Mailing Address PO Box 2059

City Lexington State KY Zip Code 40588

Purpose of Disbursement
Contribution

Candidate Name

Rep. Garland Andy Barr

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KY District: 06

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444209

Amount of Each Disbursement this Period

1500.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Rand Paul For Us Senate 2016

Mailing Address PO Box 72928

City Newport State KY Zip Code 41072

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Sen. Rand Paul

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KY District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444214

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Jason Smith For Congress

Mailing Address PO Box 1324

City Cape Girardeau State MO Zip Code 63702

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Jason Smith

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 08

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444215

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Crowley for Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Rep. Joseph Crowley

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 14

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444216

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Johnson for Congress

Mailing Address PO Box 906

City Marietta State OH Zip Code 45750

Purpose of Disbursement Contribution

011

Candidate Name

Rep. William Leslie Johnson

Category/Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: OH District: 06

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444217

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Johnson for Congress

Mailing Address PO Box 906

City Marietta State OH Zip Code 45750

Purpose of Disbursement Contribution

011

Candidate Name

Rep. William Leslie Johnson

Category/Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: OH District: 06

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444218

Amount of Each Disbursement this Period

1500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Ryan Costello For Congress

Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381

Purpose of Disbursement Contribution

011

Candidate Name

Ryan Costello

Category/Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: PA District: 06

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444219

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Castro For Congress

Mailing Address PO Box 544

City San Antonio State TX Zip Code 78292

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Rep. Joaquin Castro

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 20

Date of Disbursement

/ /

Transaction ID : 39444220

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Rodney PAC

Mailing Address PO Box 573

City Edwardsville State IL Zip Code 62025

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Rodney PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39444221

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Rodney PAC

Mailing Address PO Box 573

City Edwardsville State IL Zip Code 62025

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Rodney PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39444222

Amount of Each Disbursement this Period

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens for Prosperity in America Today PAC

Mailing Address 228 S Washington Street, Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Citizens for Prosperity in America Today PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : 39444223

Amount of Each Disbursement this Period

3000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Bluegrass Committee

Mailing Address 228 S. Washington Street
Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Bluegrass Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2016

Transaction ID : 39480064

Amount of Each Disbursement this Period

5000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Promoting Our Republican Team PAC

Mailing Address 8331 Little Harbor Drive

City Cincinnati State OH Zip Code 45244-2768

Purpose of Disbursement
Contribution

011

Candidate Name

Promoting Our Republican Team PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2016

Transaction ID : 39480069

Amount of Each Disbursement this Period

5000.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

13000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. David Rouzer For Congress

Mailing Address PO Box 2267

City Smithfield State NC Zip Code 27577

Purpose of Disbursement
Contribution

Candidate Name

Rep. David Rouzer

Office Sought: House
 Senate
 President
State: NC District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 39493091

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. The Good Fund

Mailing Address PO Box 6572

City Springfield State VA Zip Code 22150

Purpose of Disbursement
Contribution

Candidate Name

The Good Fund

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 39493092

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Cresent Hardy For Congress

Mailing Address PO Box 753941

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement
Contribution

Candidate Name

Rep. Cresent Hardy

Office Sought: House
 Senate
 President
State: NV District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 39500909

Amount of Each Disbursement this Period

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Bob Casey for Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Robert P. Casey Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500911

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Bob Casey for Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Robert P. Casey Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500912

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Joe Wilson For Congress Committee

Mailing Address PO Box 2145

City West Columbia State SC Zip Code 29171-2145

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Joe Wilson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SC District: 02

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500913

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Marsha Blackburn for Congress, Inc.

Mailing Address PO Box 3750

City Brentwood State TN Zip Code 37024-3750

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
Rep. Marsha Blackburn

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: TN District: 07

Date of Disbursement

/ /

Transaction ID : 39500914

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Rodney PAC

Mailing Address PO Box 573

City Edwardsville State IL Zip Code 62025

Purpose of Disbursement
Void - Rodney PAC; check dated 5/2/16

Category/
Type

Candidate Name
Rodney PAC

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : 39507355

Amount of Each Disbursement this Period

Memo Item
Void - Rodney PAC; check dated 5/2/16

Full Name (Last, First, Middle Initial)

C. Friends Of Erik Paulsen

Mailing Address P.O. Box 44369
250 Prairie Center Drive

City Eden Prairie State MN Zip Code 55344

Purpose of Disbursement
Void - Friends Of Erik Paulsen; check dated 5/20/15

Category/
Type

Candidate Name
Rep. Erik Paulsen

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MN District: 03

Date of Disbursement

/ /

Transaction ID : 39508122

Amount of Each Disbursement this Period

Memo Item
Void - Friends Of Erik Paulsen; check dated 5/20/15

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends Of Erik Paulsen

Mailing Address P.O. Box 44369
250 Prairie Center Drive

City Eden Prairie State MN Zip Code 55344

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Erik Paulsen

Category/
Type

Office Sought: House
 Senate
 President
State: MN District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2016

Transaction ID : 39508143

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Schatz For Senate

Mailing Address PO Box 3828

City Honolulu State HI Zip Code 96812

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Brian Schatz

Category/
Type

Office Sought: House
 Senate
 President
State: HI District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2016

Transaction ID : 39510765

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. People For Ben

Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Ben Lujan

Category/
Type

Office Sought: House
 Senate
 President
State: NM District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2016

Transaction ID : 39510766

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. People For Ben

Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Ben Lujan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2016

Transaction ID : 39510767

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Lisa Murkowski For US Senate

Mailing Address PO Box 100847

City Anchorage State AK Zip Code 99510

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Lisa Murkowski

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39529953

Amount of Each Disbursement this Period

3000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Lisa Murkowski For US Senate

Mailing Address PO Box 100847

City Anchorage State AK Zip Code 99510

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Lisa Murkowski

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39530314

Amount of Each Disbursement this Period

2000.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Gallego For Arizona

Mailing Address PO Box 1710

City Phoenix State AZ Zip Code 85001

Purpose of Disbursement Contribution

011

Category/Type

Candidate Name

Ruben Gallego

Office Sought: House Senate President
State: AZ District: 07

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39531516

Amount of Each Disbursement this Period

2500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Lamborn for Congress

Mailing Address PO Box 64107

City Colorado Springs State CO Zip Code 80962

Purpose of Disbursement Contribution

011

Category/Type

Candidate Name

Rep. Douglas L. Lamborn

Office Sought: House Senate President
State: CO District: 05

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39534207

Amount of Each Disbursement this Period

3000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Carlos Curbelo Congress

Mailing Address 8724 SW 72nd St

City Miami State FL Zip Code 33173

Purpose of Disbursement Contribution

011

Category/Type

Candidate Name

Rep. Carlos Curbelo

Office Sought: House Senate President
State: FL District: 26

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39536356

Amount of Each Disbursement this Period

2000.00

Memo Item Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. David Scott For Congress

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. David Albert Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 13

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39537289

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. David Scott For Congress

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. David Albert Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 13

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39537662

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Rodney for Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568-0344

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Rodney L. Davis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39544680

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Richard E. Neal

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39545159

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Martin Heinrich For Senate

Mailing Address P.O. Box 25763

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Martin Heinrich

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39545160

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Martin Heinrich For Senate

Mailing Address P.O. Box 25763

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Martin Heinrich

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39545162

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Ryan Costello For Congress

Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Ryan Costello

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39545163

Amount of Each Disbursement this Period

2000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Mike Lee Inc

Mailing Address 10 West Broadway
Suite 500

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Sen. Mike Lee

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: UT District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39545164

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Common Sense Colorado

Mailing Address PO Box 1978

City Denver State CO Zip Code 80201

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Common Sense Colorado

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2016

Transaction ID : 39560611

Amount of Each Disbursement this Period

2500.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

7000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Michigan Republican Party - Federal Account

Mailing Address 520 Seymour Ave.

City Lansing State MI Zip Code 48933

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 39560613

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Bobby Guerra Campaign

Mailing Address 10213 N. 10th Street

City McAllen State TX Zip Code 78504

Purpose of Disbursement
Contribution

011

Candidate Name

TX Rep. Roberto Bobby Guerra

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500915

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Committee to Re-Elect Garnet Coleman

Mailing Address PO Box 88140

City Houston State TX Zip Code 77288

Purpose of Disbursement
Contribution

011

Candidate Name

TX Rep. Garnet Coleman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500916

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Friends of Dan Huberty

Mailing Address 1 E Greenway Plaza, Suite 225

City Houston State TX Zip Code 77046

Purpose of Disbursement
Contribution

011

Candidate Name

TX Rep. Dan Huberty

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500917

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Dr. Greg Bonnen

Mailing Address 405 David

City Friendswood State TX Zip Code 77546

Purpose of Disbursement
Contribution

011

Candidate Name

TX Rep. Greg Bonnen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500919

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Friends of John Zerwas

Mailing Address 1012 Morton Street

City Richmond State TX Zip Code 77469

Purpose of Disbursement
Contribution

011

Candidate Name

TX Rep. John Zerwas

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500921

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Giovanni Capriglione Campaign

Mailing Address 1352 Ten Bar Trail

City Southlake State TX Zip Code 76092

Purpose of Disbursement
Contribution

011

Candidate Name

TX Rep. Giovanni Capriglione

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500922

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. J.D. Sheffield Campaign

Mailing Address 601 Indian Hills Rd

City Gatesville State TX Zip Code 76528

Purpose of Disbursement Contribution

011

Candidate Name

TX Rep. J.D. Sheffield

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500923

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Jose Menendez Campaign

Mailing Address PO Box 761780

City San Antonio State TX Zip Code 78245

Purpose of Disbursement Contribution

011

Candidate Name

TX Sen. Jose Menendez

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500924

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Juan Hinojosa Campaign

Mailing Address 423 Nolana Avenue

City McAllen State TX Zip Code 78504

Purpose of Disbursement Contribution

011

Candidate Name

TX Sen. Juan Hinojosa

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 39500925

Amount of Each Disbursement this Period

1000.00

Memo Item Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Kirk Watson Campaign

Mailing Address PO Box 2004

City Austin State TX Zip Code 78768

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

TX Sen. Kirk Watson

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39500928

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Representative Richard Pena Raymond Future of Texas Fund

Mailing Address PO Box 450349

City Laredo State TX Zip Code 78045

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

TX Rep. Richard Pena Raymond

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39500929

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Van Taylor Campaign

Mailing Address PO Box 261676

City Plano State TX Zip Code 75026

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Nicholas Van Taylor

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39500956

Amount of Each Disbursement this Period

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Citizens for Stan Saylor

Mailing Address 122 North Franklin St

City Red Lion State PA Zip Code 17356

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
PA Rep. Stanley Saylor

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : 39511728

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Christi Craddick Campaign

Mailing Address 1500 Dillman St

City Austin State TX Zip Code 78703

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
Christi Craddick

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : 39511729

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Cindy Burkett for State Representative

Mailing Address 226 Magic Ln

City Sunnyvale State TX Zip Code 75182

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
TX Rep. Cindy Burkett

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : 39511730

Amount of Each Disbursement this Period

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Drew Darby Campaign

Mailing Address PO Box 3284

City San Angelo State TX Zip Code 76902

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

TX Rep. Drew Darby

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39511731

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Friends of Brandon Creighton

Mailing Address 2257 N Loop 336
Ste 140-366

City Conroe State TX Zip Code 77304

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Brandon Creighton

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39511732

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Friends of Larry Taylor

Mailing Address PO Box 1208

City Friendswood State TX Zip Code 77549

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

TX Sen. Larry Taylor

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39511733

Amount of Each Disbursement this Period

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Jodie Laubenberg Campaign

Mailing Address PO Box 1154

City Wylie State TX Zip Code 75098

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

TX Rep. Jodie Laubenberg

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39511734

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Sarah Davis Campaign

Mailing Address 4203 Tennyson Street

City Houston State TX Zip Code 77005

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

TX Rep. Sarah Davis

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39511735

Amount of Each Disbursement this Period

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Texans for Charles Schwertner

Mailing Address PO Box 2448

City Georgetown State TX Zip Code 78627-2448

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

TX Sen. Charles Schwertner MD

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 39511736

Amount of Each Disbursement this Period

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Texans for Joan Huffman

Mailing Address 3375 WestPark Dr. Ste 135

City Houston State TX Zip Code 77005

Purpose of Disbursement
Contribution

011

Candidate Name
TX Sen. Joan Huffman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : 39511737

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

B. Texans for Kelly Hancock SPAC

Mailing Address 4908 Dory Court

City North Richland Hills State TX Zip Code 76180

Purpose of Disbursement
Contribution

011

Candidate Name
TX Sen. Kelly Hancock

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : 39511738

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

Full Name (Last, First, Middle Initial)

C. Todd Hunter Campaign

Mailing Address 445 Cape Henry

City Corpus Christi State TX Zip Code 78412

Purpose of Disbursement
Contribution

011

Candidate Name
TX Rep. Todd Hunter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : 39511739

Amount of Each Disbursement this Period

1000.00

Memo Item
Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. Friends of Jerry Petrowski

Mailing Address 720 North 136th Avenue

City Marathon State WI Zip Code 54448

Purpose of Disbursement Contribution

011

Candidate Name

Jerry Petrowski

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39545166

Amount of Each Disbursement this Period

500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Steffen for Wisconsin

Mailing Address 1320 Sunray Lane

City Howard State WI Zip Code 54313

Purpose of Disbursement Contribution

011

Candidate Name

WI Rep. David Steffen

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 39545167

Amount of Each Disbursement this Period

500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Building A Stronger PA

Mailing Address PO Box 194

City Landisville State PA Zip Code 17538

Purpose of Disbursement Contribution

011

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2016

Transaction ID : 39560614

Amount of Each Disbursement this Period

500.00

Memo Item Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

1500.00

TOTAL This Period (last page this line number only)..... ▶

25000.00